AGED-OUT PREGNANT AND PARENTING TEENS SPEAK OUT ABOUT ACADEMIC ENGAGEMENT AND PERFORMANCE – A RETROSPECTIVE STUDY

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Abstract
Combining pregnancy and parenting with schooling is no easy task even for mature and well-established students, but being a pregnant and parenting teenager in foster care while trying to succeed in school is even more complicated. Pregnant and parenting teens (PPTs) in the foster care system are greatly impacted and affected by educational disruption and academic difficulties due to the added burdens of their status in foster care. The purpose of this qualitative study was to understand what factors contribute to school engagement and to determine to what extent attachment theory, identity theory, self-efficacy, and critical race theory explain and illuminate barriers to and facilitators of promoting school engagement and positive educational outcomes for pregnant and parenting teens in foster care. In-depth interviews were conducted with 11 aged-out participants who were pregnant and / or parenting teens while in foster care. Results indicated that attachment connections, adolescent identity, and self-efficacy had strong consequences on school engagement, disengagement, and educational outcomes among participants. Themes of system response, impact of system response, educational outcome, and lessons learned emerged as highlights of participants’ lived experiences in foster care. These themes, along with implications for social work practice, policy, and research are discussed in the following paper. PPTs in this study underscored the need to develop intervention programs that promote healthy attachment relationships and contribute to positive ethnic and cultural identities and self-efficacies. These efforts, in concert with trainings for child welfare staff and foster parents on how best to support PPTs in achieving these intended outcomes, could increase their school engagement and educational advancement and therefore mitigate the short and long-term challenges associated with teen pregnancy and foster care.
“AGED-OUT PREGNANT AND PARENTING TEENS SPEAK OUT ABOUT ACADEMIC ENGAGEMENT AND PERFORMANCE – A RETROSPECTIVE STUDY”

SERENA K. OHENE

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Dedication

This dissertation is dedicated to my deceased father, Mr Robertson Amponsah Akyeampong and surviving mother, Mrs Caroline Akyeampong. The strength of their love and support of me since infancy has brought me this far in life. Thank you Paapa and thank you Ma.

In addition, this dissertation is dedicated to all the aged-out pregnant and parenting teens who difficult though it was, articulated your deep-felt pain of your experiences in foster care. Your insights into the problems you faced and constructive advices will go a long way in helping others and building a better system. Thank you.
Epigraph

“Everyone in a community has a vested interest in everyone else’s children, because everyone else’s children determine the next adult population that makes for a successful society” - Jack P. Shonkoff.
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ABSTRACT

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Serena K. Ohene

Antonio R. Garcia, Ph.D., Dissertation Supervisor

Combining pregnancy and parenting with schooling is no easy task even for mature and well-established students, but being a pregnant and parenting teenager in foster care while trying to succeed in school is even more complicated. Pregnant and parenting teens (PPTs) in the foster care system are greatly impacted and affected by educational disruption and academic difficulties due to the added burdens of their status in foster care. The purpose of this qualitative study was to understand what factors contribute to school engagement and to determine to what extent attachment theory, identity theory, self-efficacy, and critical race theory explain and illuminate barriers to and facilitators of promoting school engagement and positive educational outcomes for pregnant and parenting teens in foster care. In-depth interviews were conducted with 11 aged-out participants who were pregnant and/or parenting teens while in foster care. Results indicated that attachment connections, adolescent identity, and self-efficacy had strong consequences on school engagement, disengagement, and educational outcomes among participants. Themes of system response, impact of system response, educational outcome, and lessons learned emerged as highlights of participants’ lived experiences in foster care. These themes, along with implications for social work practice, policy, and research are discussed in the following paper. PPTs in this study underscored the need to develop intervention programs
that promote healthy attachment relationships and contribute to positive ethnic and cultural identities and self-efficacies. These efforts, in concert with trainings for child welfare staff and foster parents on how best to support PPTs in achieving these intended outcomes, could increase their school engagement and educational advancement and therefore mitigate the short and long-term challenges associated with teen pregnancy and foster care.

Keywords: Isolation; Stigma; Oppression; Low Self-Esteem; Belongingness; Hopefulness
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Chapter I: Introduction

According to the World Health Organization (2014), 49 out of 1000 adolescent girls between the ages of 15 to 19 across the globe became pregnant in 2014. Reportedly, the United States has the highest recorded births among teens even though the overall birth rates among teenagers have declined since the 1990’s (Brosh, Weigel, & Evans, 2007; Steinka-Fry, Wilson & Tanner-Smith, 2013).

Teenage pregnancy continues to be a disconcerting issue as it has been linked with immediate and long-term repercussions on parenting youth and their children. Many studies have shown that a relationship exists between early child bearing, lower academic achievement, and subsequent employment opportunities (Whitman, Borkowski, Shellenbeck & Nath 1987). Kruger (2011) reported that it is far more likely for parenting teens to not obtain a high school diploma and live in poverty or receive welfare than it is for their colleagues who are not teen parents. Studies have shown that teenage pregnancy and parenting are highly associated with maternal social exclusion, poor maternal mental health, and depressive symptomatology (Deal & Holtz, 1998; Hudson, Elek, & Campbell-Grossman, 2000).

Although there have been many studies on the myriad of personal, social, psychological, economic, and educational problems associated with teen pregnancy and parenting, a lot is unknown on the difficult and complex impact of adolescent pregnancy and parenting among the foster care population. The burgeoning rate of teenage pregnancy and births among foster care youth is a growing concern (Dworsky, A. & Courtney M. E., 2010). In fact, unlike their peers who are not in care, pregnant and parenting teens in foster care are two times more likely to be pregnant by the age of 19 years than their peers, and many of them will have a repeat pregnancy by age 19 (Boonstra, 2011). A study assessing the outcomes of youth that transitioned from
foster care in the state of Utah revealed that 31% of the pregnant and parenting young women between the ages of 18-24 became pregnant within three years of leaving the foster care system. This rate is three times more than birth rates among same aged peers who are not in the foster care system (Dworsky & Courtney, 2010).

A growing and troubling concern among pregnant and parenting teens is the declining educational statistics. In 2003, 10% of pregnant and parenting teens between the ages of 15-17 graduated from high school in the United States (Brosh et al., 2007). Another study by Basch (2011) estimated that 10 – 12% of pregnant and parenting teens are unable to graduate from high school. The National Campaign to Prevent Pregnancy recorded that only 33% of the pregnant and parenting teens are able to complete their high school education as they grow older (as cited in Brosh et al., 2007). Studies have shown that children in foster care often lag behind in school and have a low rate of academic performance (Martin & Jackson, 2002; Burley & Halpern, 2001). The authors, using qualitative methods, found that one-third of 38 former foster children who had exited from care, graduated from school, and had become high achievers reported they experienced some major obstacles. These obstacles included lack of social support, low expectations from child welfare professionals, and perceived stigmatization from being in foster care (Martin & Jackson, 2002).

Foster care placement, originally designed as a temporary placement while the negative conditions within the child’s familial and environmental systems improved, is related to adverse developmental repercussions, inclusive of behavioral, developmental, academic, and psychological problems that persist well into adulthood (Lawrence, Carlson, Egeland, 2006; Garcia et al., 2015). This could explain the low rate of academic performance among pregnant and parenting teens.
This qualitative research study examines the lack of school attendance and engagement among pregnant and parenting teens in New York City’s foster care system. One-on-one interviews reveal data from the teens’ own perspectives as to how they can increase school attendance and improve their academic performance. Theoretical perspectives underpinning PPTs lack of school attendance and engagement are explored along with the qualitative data. After presenting the methodology, data and data analysis, this paper explores the implications of the study for future research, practice, and policy for promoting educational performance for this sub-population of youth in foster care.

**Problem Statement**

A recent research study to understand the challenges of educational achievements among the pregnant and parenting teens in the New York City child welfare system and to identify strategies which would optimize educational achievement for the parenting youths, revealed worrisome statistics in the educational decline among the pregnant and parenting teens in the New York City foster care system (Pillow, 2015). Through an information sharing contract between the Office of ACS and the New York City Department of Education, school enrollment data showed that about 30 % of pregnant and parenting teens were enrolled in school within the first 70 days of the academic year 2013-2014. It is notable that more than half of pregnant and parenting teens were discharged from their schools. The pregnant and parenting teens that were not enrolled in school were either discharged from the schools after 20 consecutive days of non-attendance as per school policy, or they withdrew from the schools of their own accord. Records show that pregnant and parenting teens are more likely to be discharged from school between the 9th and 10th grades (Pillow, 2015).
Pregnant and parenting teens in foster care face more educational barriers. Academic performance among foster care children has been lower than that of their peers who are not in care and studies have shown that children in foster care tend to experience educational disruption and a number of obstacles to completing academic work (Zimmerman; Gil & Bogart as cited in Blome, 1997; Vacca 2008). IQ scores taken of all school aged children placed in foster care between 1995 and 1999 in the state of Arkansas showed an average IQ of 88 which is on the low spectrum of the intelligent quotient (Stone, 2007). Children in foster care are a vulnerable population with wounds of trauma from physical abuse, maltreatment, and neglect (Vacca 2008), all of which can impact their school performance (Stone, 2007). Additionally, children who are maltreated may be at a higher risk of repeating a grade than those who are not (Stone, 2007).

Studies show that pregnant and parenting teens are at higher odds of not returning to school after they withdraw or drop out of school. Moreover, they are more prone to having more children which perpetuates their “disadvantaged” positionality (Baytop 2006; Carter, Osofsky, & Hann, 1991; Coley & Chase-Landsdale, 1998). Education for our young adults in our modern economy is a pivotal threshold to economic freedom as it paves the way for professional advancement as well as health and social benefits (Steinka-Fry, Wilson & Tanner-Smith, 2013). It is, therefore, clear that our pregnant and parenting teens in foster care stand more to be greatly affected and impacted by educational disruption and academic difficulties due to the added burden of being pregnant and a parent.
Chapter II: Literature Review, Theoretical Framework, Research Questions

There are multiple theoretical and conceptual perspectives that help frame and underscore the salience of this research study’s examination of the underlying causes of lack of school attendance and engagement among pregnant and parenting teens in the foster care system and how they can be encouraged to attend school. Identity Theory, Attachment Theory, and Self-Efficacy Theory guide this research study in understanding the origins or mechanisms that lead to students’ educational apathy. These theories also help lay the groundwork for collaboration with PPTs to develop and implement interventions to promote educational engagement.

Identity Theory

What follows is a discussion about how identity evolves during adolescence through the lens of Erikson’s theory of Identity vs. Confusion. This applies to the crucial developmental stage of the adolescent and the impact of this period on pregnant and parenting teens’ views of themselves and how others view them. Erikson’s theory helps conceptualize how adolescents’ concepts of themselves and in relation to others can affect their decision making in educational and personal efficacy. This section also looks at Erikson’s Industry vs. Inferiority psychosocial developmental stage and how this stage influences other stages and its possible effect on the origins of mechanisms affecting pregnant and parenting teen’s lack of school attendance and engagement. Finally, this section examines the literature on Identity and educational outcomes.
Defining and Understanding Identity Formation

The Oxford Dictionary and Thesaurus American Edition, defines the term *identity* as “the state of being the same in substance, nature, qualities, etc” (1996, p. 727). The etymology of *identity*, according to Paranjpe (1975), comes from the Latin word *idem* which means the same. Most human beings experience themselves as being the same person and as having a feeling of continuity of existence. Erikson (1963) defined *sense of identity* as “an accrued confidence that the inner sameness and continuity prepared in the past are matched by the sameness and continuity of one’s meaning for others” (p. 261).

The Oxford Dictionary and Thesaurus American Edition’s second definition of the term *identity* is “the quality or condition of being a specified person or thing”; “individuality”; “personality”; (1996, p. 727). Erikson (1968) states that identity refers to the awareness of one’s uniqueness, defining who the self is and who the self is amongst a social group or one’s family members. Josselson (1994) looks at identity as the crossroad of the individual and society; the self is intertwined with the society and the society is intertwined to the self. Identity connects the individual person to the social world and creates a link from one’s childhood to adulthood. According to Paranjpe (1975), the concept of identity shapes the formation of one’s personality.

Erikson’s Industry vs. Inferiority Psychosocial Stage

Erikson’s (1963) Industry versus Inferiority stage is a crucial developmental epoch from middle childhood to pre-adolescence where the child’s emphasis rests mostly on academic achievement, moving beyond the period of home and play to school and work. The age of Industry vs. Inferiority heralds the development of the child’s sense of herself or himself. Erikson postulates that the child moves toward aspirations of becoming competent by taking more pride in accomplishments and beginning to believe in his or her skills.
The child is aware of being able to succeed and fail, allowing him or her develop a sense of identity, uniqueness, and self-esteem. The child thrives on praise and encouragement and acknowledgement of his or her efforts. The Industry versus Inferiority psychosocial developmental stage focuses on the degree to which the child’s level of competency and effectiveness is appreciated and valued by adults. Otherwise, the child begins to experience an inferiority complex (Eccles, 1999; Erikson, 1963).

**Linking Industry vs. Inferiority with Lack of School Engagement**

Erikson (1963; 1968) pointed out that the successful navigation of the Industry stage of psychosocial development (ages 6-11), where the child’s competencies and accomplishments are acknowledged, sets the stage for the formation of Identity achievement during the adolescent period (ages 12-19). The commitment to “Industry” during childhood will generate a sense of confidence for the child which is necessary for the achievement of the subsequent task ahead.

What does Industry vs. Inferiority mean for the pregnant and parenting teens in the foster care system? Furthermore, what is the relevance of Identity achievement in their school attendance and engagement? Most foster care placements, which occur as a result of serious stressors, including child abuse and neglect, poverty, substance abuse, mental illness, and exposure to community violence, may detrimentally influence the child’s psychosocial development and educational achievement or academic attainment (Martin & Jackson 2002). Pregnant and parenting teen’s lack of school attendance and engagement may be traced to early childhood functional impairment in academic attainment caused by child abuse. This may subsequently lead to an Inferiority Complex that may persist well on to adolescence, causing further confusion and educational apathy (Erikson, 1968; Kools, 1997).
According to Whiting (2006), adolescents become educationally apathetic because they have learned to think of themselves as underachievers due to reasons such as low test scores and/or negative self-worth. The self is apperceived as academically helpless and hopeless among the student body which further drives one away from academic settings due to lack of confidence and a sense of low self-esteem.

Pregnant and parenting teens in foster care may become educationally apathetic due to abuse, declining grades in school performance, and negative views of themselves. As posited by Roeser and Lau (2002), adolescents are more likely to experience failing grades in school due to abuse and neglect and these academic problems become heightened during the teenage years. The adolescent’s academic identity as an achiever or underachiever can become a pathway for promising future college attendance and employment success.

In a research study by Allwood and Widom (2013) to examine the impact of child abuse and neglect on the attainment of developmental milestones in high school graduation, employment, and marriage, abuse and neglect during childhood before age 11 was found to account for low rates of high school completion, and decreased employment and marital relationships compared to non-abused peers. The study sample was drawn from cases substantiated for abuse and neglect by the court between the years of 1967 and 1971. Out of a list of 1,575 abused and neglected cases from the court records, the researchers traced and located 1,307 subjects and interviewed 1,196 of them for two hours between the years of 1989 and 1995. The findings showed a statistically significant number of abused and neglected children who were unable to graduate from high school.

Allwood and Widom’s (2013) study is relevant for this research as it parallels of low rate of school completion among the abused and neglected children in their study and the lack of
school engagement among the pregnant and parenting teens in foster care. According to Chipungu and Bent-Goodley (2004), most children enter into foster care due to abuse and neglect, which places pregnant and parenting teens in the foster care system at risk for low school attendance and engagement.

Although many studies have reported a significant relationship between childhood abuse and decreased high school graduation rates, Allwood and Widom’s (2013) study was limited to only abused and neglect cases substantiated by the court. Thus, the study cannot be generalizable to all abuse and neglect cases that remain unreported. According to Allwood and Widom (2013), many of the reported cases of child abuse and neglect are slanted towards families of low socio-economic status and cannot be compared with abuse cases among the high socio-economic classes who could possibly afford to have their children graduate from high school.

**Identity vs. Confusion Role in Foster Care Pregnant and Parenting Adolescents**

This section looks at why Erikson’s Identity vs. Confusion Theory is very critical to understanding adolescents in general; how Identity Theory applies to the experiences of adolescents in the foster care system; and how Identity Theory may illuminate why pregnant and parenting teens do not engage in educational experiences (or feel motivated) to attend school. This section also briefly discusses the stage of adolescence before Erikson’s Theory of Identity. This is important as Erikson’s psychosocial stage of Identity vs. Confusion is based upon the developmental stage of the adolescent period; a period that marks the ending of childhood and beginning of young adulthood (Erikson 1968). Understanding the adolescent developmental period offers insight on the crucial developmental stage under which the pregnant and parenting teens in foster care fall and how the adolescent stage impacts the identity formation and development.
Although the term “adolescent” is not globally defined, Laser and Nicotera (2011) define the adolescent period ranging from ages 12 through 21. Josselson (1994) and Paranjpe (1975), state that the adolescent or teenage period is a transitional period of physiological, cognitive, and psychological changes, ushering in the time of puberty while ending childhood. The individual goes through a growth spurt which can be confounding and all too much for the youth to grasp. According to Paranjpe (1975), the hormonal changes and physical growth alone are enough to question the individual’s sense of being and belonging. The adolescent’s sense of identity is shaken as the adolescent experiences what may be perceived as an altered sense of self and where continuity is indeed threatened. It is also the stage where the individual is confronted with making various choices related to work, school, family, and marital status. It marks the transition from being a dependent child to being more resourceful as expected by family and society as a whole (Paranjpe, 1975). Roeser and Eccles (1998) postulated that the adolescent stage predisposes youth to be vulnerable as it can be a source of stress leading to behavioral problems among youth and impact their academic motivation and performance.

Adolescent identity can be complicated and dynamic at the same time, characterized by questions and doubts like “Who am I?” and “What am I doing in my life?” Even though identity changes occur throughout a person’s life span, the adolescent stage is marked by a perceived identity crisis (Erikson, 1968). Paranjpe (1975) postulated that one’s identity is also derived from the ability to fuse in the self, the image of one’s parents or role models and the positive emotions connected with it. The identity development which starts during childhood becomes crucial during the adolescent stage and more so for the adolescent in foster care who is already fraught with feelings of rejection and abandonment due to living outside the home of family of origin (Kools, 1997).
According to Salahu-Din and Bollman (1994), it is more challenging for adolescents in foster care to achieve developmental tasks due to the compounding emotional stress of being removed from the parent’s home. In a research study to evaluate the effects of long term foster care placement among adolescents, Kools (1997) found that foster care placement negatively affected adolescents’ identity. The purposive sampling was derived from a group of youth in foster care with a final sample size comprising 17 adolescents between the ages of 15 and 19 years. Data collection comprised of analyzing the case records, interviews with the adolescents in the foster homes and in group home settings. To collect data on the effects of foster care from the perspectives of the adolescents, researches explored the following topics: descriptions of their foster care placements; the positive and negative things about their placements; their families of origin and their understanding of the reasons for entering into care; comparison between their home of origin and foster care homes; and their perceptions of being a foster child, among others. The findings of Kools study revealed a central theme of devaluation of the adolescent self by others embedded in underlying factors, such as, the institutional structure of foster care group home systems, the stereotypic view of the proverbial “foster child”, and the deprecating view and status quo of the foster child. Kools defined devaluation of self as “the lessening or discounting of one’s status by others through their beliefs that are, in turn, reflected in their actions” (p 266).

Kools’ (1997) study further revealed that foster care adolescents reported being teased by colleagues in school and being looked down by foster care staff. The biases and stereotypical regard of foster children as being delinquent, psychologically impaired, and amounting to nothing may have a profound negative impact on their self-worth and academic capabilities. According to Kools, the conditions of the foster care group homes as reported by the adolescents,
such as, rigidity of rules, lack of respect and positive regard for the foster child, coupled with frequent staff and professional turnover that often lead to inconsistent caregiving and service discontinuity, may perpetuate feelings of devaluation and stigmatization. In a research study examining the correlations of feelings of stigmatization and adolescent pregnancy, it was found that 39.1% reported feeling stigmatized and considered aborting the pregnancy due to fear of being judged by parents and teachers and sadness of being rejected by the fathers of the babies (Wiemann, Rickert, Berenson, & Volk, 2005). Wiemann et. al, postulated that new teenage moms are at a higher risk of alienating themselves socially and therefore need to be with their babies in a nurturing environment that is supportive of educational and personal efficacy.

Pregnant and parenting teens in foster care face serious challenges and are at a higher risk of impaired identity development. Feelings of self-devaluation and stigmatization can lead to depressive states that can effect motivation to attend school (Kools, 1997). The author stated that the foster youth’s devaluation by others can cause an identity of stigmatization and sense of low self-esteem. According to Harter (1990), adolescents must always answer the questions about who they by reconciling who they are from their past, present, and the future. Being an adolescent and pregnant in foster care can be a critical transition in one’s life where the youth is particularly sensitive to the perceptions of what people think of them.

Although Kools’ (1997) study revealed correlations of foster care placement and negative effect on the identity development of the adolescent, there were some limitations to the study which cannot be generalized to all foster care adolescents. Firstly, this study was limited to 17 adolescents who were recruited from a group that met to discuss their personal psychological and behavioral issues. These adolescents were already classified as facing issues and were in long term foster care, which can be more challenging than those who have been in short term foster
care placement or for those in regular foster boarding homes with supportive and nurturing foster parents.

**Connecting Identity Theory to Pregnant and Parenting Teens’ Increase in School Attendance**

DeVos (1982) remarked that in the process of developing their identities, adolescents begin to ask themselves who they are and what it means for them to be in a minority group of being pregnant and parenting teens. The author further stated that belonging to a group with a common frame of reference endows the adolescent with a sense of belonging significant for their identity formation. Oyersman and Harrison (1998) postulated that having a positive concept of one’s self, being approved by peers, and knowing that others think well of you are correlated with academic improvement.

Feelings of acceptance and a sense of belonging among pregnant and parenting teens will go a long way in developing a healthy sense of self in their growing identity formation and boost their school attendance. Pregnant and parenting teens, especially those in group homes may self-identify with one another, forging a membership of being in the common minority group of being pregnant and / or a parent. Their awareness and understanding of shared pain, values, and origin can unite them into a strong force out of which a self-defining foster care group home membership can erupt, giving them an impetus to re-define who they are. In turn, this experience can enhance their self-concept and subsequently increase their school attendance (Oyersman, Terry & Bybee 2002). In a qualitative study, Klaw and Rhodes (1995) examined the association between mentoring relationships and career development among 204 African American pregnant and parenting teens between the ages of 11-19 years. The results showed significant correlations between mentors and psychosocial well-being of pregnant and parenting teenagers. They found
that a contributing factor in predicting educational and occupational efficacy was having a mentor or adult connection who believed in the teen and played a significant role in adolescent’s identity development formation in educational and employment attainment.

Teenage students, according to Adamson, Hartman, and Lyxell (1999), emphasize that their relationships with other people are paramount. Sartor and Youniss (2002) postulated that positive relatedness and relationships with adult connections or significant others are predictors of adolescents’ development of sense of security and identity achievement. Klaw and Rhodes’ (1995) study shows that collaborating with pregnant and parenting teens in foster care and connecting them with their identified mentors and adult connections can yield positive educational and occupational outcomes. Klaw and Rhodes’ (1995), however, believe that the association between positive educational and occupational outcomes and mentoring relationships with pregnant and parenting teens in their study cannot be conclusive. They call for a longitudinal study to evaluate educational outcomes and mentor for pregnant and parenting teens.

In a quantitative study by Glasgow, Dornbusch, Troyer, Steinberg, and Ritter (1997), the authors used path analyses to test the associations between four parenting styles (namely authoritative, authoritarian, indulgent, and disengaged/neglectful), attributions made by adolescents, and educational outcomes. The results suggested that the effect of parenting styles was related to adolescent’s negative or positive attributions of the parent, which subsequently impacts the adolescent’s educational achievement outcomes. The authors’ relied on a subset of a data of questionnaire for six high schools in Wisconsin and California. Survey responses from 2,353 students showed significant educational outcomes in adolescent’s perceptions of positive parental relationships. Although the study was primarily focused on non-foster care and non-
pregnant adolescents’, its findings are applicable to this study on pregnant and parenting teen’s educational outcomes. The essential premise is that the quality of the parent, foster parent, caregiver, and social service staff / professional – relationship with the non-foster or foster youth impacts the ways in which teens view themselves and handle affairs in their lives.

A study by Adamson, Hartman, and Lyxell (1999) to understand the adolescent’s self-concept in regards to his or her personal future found that positive adult connections was very integral to adolescents’ views of themselves, and how they see themselves in the future. This was a study of 12 first and third year students between the ages of 16 and 19 years living in a small town. The study was limited to adolescents need for parental and familial adult connections from a very small family oriented town. A larger town with non-familial adult connections will need to be explored to measure adolescent’s positive self-concept with non-familial adult connections.

**Attachment Theory**

The importance of Attachment Theory for this study cannot be overlooked as it provides us with insight into the personal experiences, and relational behaviors of pregnant and parenting teens in foster care. Looking at this research study with the lens of attachment theory will provide an understanding of the pregnant and parenting teens’ attachment relationships and difficulties before foster care placement and during foster care placement and how we can support them in creating a nurturing environment that is conducive to educational and self-efficacy. This section briefly explores the history of attachment theory, the functions of Attachment theory, its relevance in the research study for understanding pregnant and parenting teens’ lack of school attendance; and how attachment theory can be used to increase school attendance and engagement.
What is Attachment Theory?

The development of Attachment Theory can be traced to the 1950’s when John Bowlby investigated the emotional responses and reactions of babies and young children when they were separated from their parents (Bowlby, 1988). Bowlby discovered that children were hard wired to seek attention, proximity, protection, and stimulation from their caregivers due to their infantile maturity level. Children survive with basic needs such as shelter, food, and clothing, but also through a nurturing, affectionate, and lasting strong relationships with a permanent and loving caregivers (Ainsworth, et al., 1978; Courtois, 2014; Mooney 2010).

Bowlby’s (1969) posited that a significant and crucial factor for optimal child development is the strong mother and child relationship that nourishes the child with comfort and protection, thereby creating a secure base for the child and necessary for the child’s survival. The child is able to assume risks and explore the world. Many studies, according to Vivona (2000), have shown correlations between secure parental attachment and optimal adolescent development. Salter (as cited in Bretherton, 1992) postulates that the child who experiences and depends on familial security at an early stage will gradually grow to form new skills and interests in life, whereas the child who is deprived of familial security at an early age will be challenged at developing skills and interests during his / her growing years.

According to Ainsworth, Behlar, Waters and Wall, (1978) attachment styles are developed based on the parent –child relationship. Secure attachment is developed when the child feels secure with the caregiver who is responsive to and consistent with the child’s needs. In the Insecure –Anxious pattern, the caregiver remains inconsistent and non-responsive. The child expects to be rejected and expects frustrations from others. In the Disorganized attachment pattern, the caregiver is inconsistent, unpredictable, and fluctuates being attentive and inattentive.
to the child’s needs causing the child to be anxious and to push away closeness while longing for it. The child is not able to commit to anything. The Insecure Avoidant child avoids emotional ties and contact for fear of being rejected.

According to Bowlby (1973; 1982), children develop cognitive representations and schemas or Internal Working Models (IWM) about how they apperceive of themselves, others, and the world. Through interactions with others, IWM is formed of how loveable or worthy the self is in the eyes of others, especially the primary attachment figure as appraised by the responses of the attachment figure. Children develop IWMs of themselves as worthy and acceptable from attachment figures who are reliable, available, and responsive. Children who had attachment figures that were unavailable and not dependable developed IWMs of themselves as unlovable and unworthy (Bowlby 1973; 1982).

**Attachment and Academic Achievement**

How might the tenets of attachment theory apply to achieving academic milestones? A study by Fass and Tubman (2002) examined the associations of parental and peer attachment and academic outcomes among college students found correlations between strong peer and parental attachment and optimum academic performance. The authors studied 357 undergraduate students between the ages of 18-24 years in a 4-year college using measures on parent and peer attachment, self-esteem, locus of control, and academic functioning in self-report questionnaires. Scores on parental and peer attachment were grouped in three categories, namely; low, medium, and high, which were based on a total score from the subscales of trust, communication, and alienation. Students with high parent and peer attachment showed high levels of self-esteem, locus of control, and academic achievement. Although many studies have shown associations between strong attachment and positive educational outcomes, Fass and Tubman’s study used self-reported GPAs
which could call into question the validity of the findings. Obtaining GPA records directly from the school registrar would minimize risks of some biases in self-report academic performance.

Although 75% of Fass and Tubman’s (2002) study participants lived with their parents and with no mention of any of the participants being a pregnant or parenting teen, the study suggests that low and negative earlier attachment patterns may explain lack of school engagement and low academic performance, whereas positive attachment is an integral constituent to school engagement and academic success for pregnant and parenting teens. Okun, Benin, and Brandt-Williams (1996) and Finn and Rock (1997) validate these findings, revealing that poor parent attachment, relationship, and communication accounted for students being at risk for low educational achievement.

In another study comprising of 121 grade seven students with an average age of 12.97 years, Duchesne and Larose (2007) investigated academic engagement and performance with adolescent’s attachment to their parents and the mediating links of perceived teacher support and problem behaviors. They found that adolescents’ attachment to both parents were positively correlated with academic motivation, which in turn facilitated positive teacher perceptions. Quality parental attachment enables the adolescent to feel secure and gain feelings of competence and high motivation for school (Duchesne & Larose 2007). Their study is relevant for understanding pregnant and parenting teen’s lack of school motivation and how best to support them by building a positive relationship that fosters a conducive environment necessary to motivate them to attend school.

Vacca (2007) wrote that foster care children suffer many scars, such as negative parental attachment as evidenced in parental neglect and abandonment. In turn, these experiences negatively influence their cognitive and learning abilities and further place pregnant and parenting
teens at-risk to experience hardships toward completing a high school education (Manlove, Welti, McCoy-Roth, Berger, & Malm, 2011).

**Attachment and Foster Care Placement**

Bowlby (1973) emphasized the importance of caregiver/parent-child relationship and the impact of the child’s separation from the caregiver or caregiver loss can be detrimental and traumatic for the child. Freud (1995, as cited in Grigsby, 1994), stated that children undergo and harbor painful and unacceptable feelings due to the shock of a separation and loss.

Many foster care children not only experience trauma from the abuse they undergo at the hands of the caregivers but also from being removed from their home of origin. Subsequent placement moves for most of the foster care children, accompanied by change of new found friends, neighborhoods, and schools, predisposes many of them to not engage in any close relationships or even ask for or accept help due to fear of rejection. Hence, they are often skilled at keeping people at arms lengths, as they are afraid of being hurt all over again (Stein, 2006).

Dozier and Chase (1998) stated that maltreatment of children and early placement of children in the foster care system results in the development of insecure attachment patterns in the foster homes. This requires foster parents to respond sensitively to the attachment needs of the children whose attachment bonds to their primary caregivers were broken due to foster care placement.

Although there have been many misconceptions about pregnant and parenting teens’ adverse educational and occupational outcomes, other studies have shown that positive attachment and family support can be assuaging factors in teens’ future outcomes. Understanding the pregnant and parenting teen’s maladaptive school truancy behaviors from the attachment
theory lens will enable child welfare staff and foster parents of pregnant and parenting teens to be supportive of the teens rather than judgmental. Collaborating with the youth’s school to provide an individualized educational program that meets the needs of the youth is warranted.

**Attachment Theory and Increase in School Attendance**

How does positive attachment impact on educational outcomes? In a longitudinal study of African American adolescent mothers and their mothers’s support, Apfel and Seitz (1996) found that positive relationship and support from the adolescents’ mothers impacted positively on the pregnant and parenting teen’s psychological adjustment. The authors studied the parenting teens with children up to twelve years under impoverished conditions in an urban area. The teen parents were asked about the extent of support they received by their mothers (the babies’ grandmothers), their academic and career lives, and the babies’ development. Findings showed that the adolescent parents that had greater support and family involvement fared better than those who had minimal family support.

In a study of attachment patterns within three groups of 42–month old toddlers, the toddlers in the foster homes had developed more secure attachment patterns with their foster parents than the toddlers in the institutional setting. There were no significant differences between the control group of toddlers raised in their own family homes and the toddlers in the foster homes. The foster home was used as an intervention for the children removed from their homes due to maltreatment. This was a longitudinal study to see how foster care intervention can be used to address early institutionalization and its detrimental effects on the children in Romania. The sample was 136 children who had been placed in institutions after being forsaken by their parents. These toddlers were randomly assigned to the foster care group (n=68) and the Institutional care group (n=68). For legal and ethical reasons, experimental children who were
placed in the foster home were not required to go back to the institution. The third group, known as the control group, were toddlers living with their families and recruited from a pediatric clinic (Smyke, Zeanah, Fox, Nelson, & Guthrie, 2010).

Smyke et al. (2010), used Ainsworth’s Strange Situation Procedure to evaluate the toddlers’ attachment patterns. The cognitive development assessment tool showed that the toddlers in institutional care scored lower in developmental quotients while there were no significant differences between the toddlers in foster care and those raised by their families. Although Smyke’s et al., study only examined toddlers’ attachment in nurturing foster homes, it is relevant to pregnant and parenting teens’ study. That is, it suggests how foster care can be used as an intervention to promote safety and provide support for the pregnant and parenting teens through positive attachment relationships with foster parents and residential care workers. Promoting nurturing environments in the foster homes and residential settings will foster school engagement and educational outcomes. A limitation to Smyke’s et al., (2010) study is that even though it shows foster care placement as a positive intervention, foster parents in the authors’ study were paid as regular employees as opposed to foster parents in the United States that receive a boarding allowance. The foster parents also received optimum support from social workers who visited them regularly and assisted foster parents in managing the behaviorally challenged children. This is very different from the lack of support that most foster parents in the U.S. receive.

Joseph, O’Connor, Briskman, Maughan, and Scott (2014) explored how adolescents who experienced childhood abuse and neglect develop secure attachments with their foster mothers. They revealed that even with adverse childhood situations, adolescents are able to form secure attachments with their foster mothers due to supportive and nurturing environments provided by
the foster parents. The positive relationship between foster mother and youth can act as mediator to minimize adjustment problems among adolescents in care. This is particularly important for pregnant and parenting teens in foster care who will benefit from the support of foster parents, teachers, and child care workers.

According to Harden (2004), provision of a nurturing home and development of positive attachment with foster family builds resiliency in the child, producing healthy behaviors, development of social skills, and achievements on academic performance, despite previous exposures to adverse events. Bergin and Bergin (2009) further argue that attachment does affect a student’s academic performance. Attachment to the school and teacher yields educational success for the child. The authors stated that the student’s attachment to the school and the teacher creates the secure base on which the student is able to tackle even difficult academic tasks. Studies have shown that students who think their teachers care for them and whose teachers spend time in building relationships with them experience lower rates of truancy, decreased anti-behavioral problems, such as aggressiveness, and buffers against early substance use, and sexual activity (Bergin & Bergin, 2009). This is significant for child welfare professionals, as it will require teachers and foster parents to forge ongoing relationships to provide a secure base for pregnant and parenting teens in foster care.

Self-Efficacy Theory

Positive attachment relationships may, in turn, increase self-efficacy among pregnant and parenting teens in foster care. According to Bandura (1997), self-efficacy is defined as the belief in one’s capabilities to organize and perform certain courses of action with the cognitive representation that those actions can be executed with success. Bandura (1995, 1997) posited that the reality of the social realm that one lives in is full of obstacles, frustrations, adversities,
iniquities, and setbacks. One must, therefore, have an optimistic sense of personal efficacy to be able to survive, achieve milestones, and experience positive well-being. However, as explained above, foster care adolescents suffer trauma due to maltreatment in their original homes and obstacles associated with being placed in foster care (Daining & DePanfilis, 2007) and the optimistic sense of self may be challenged in this setting.

This section will examine how self-efficacy through social persuasion and encouragement can be used to increase pregnant and parenting teens’ school attendance. People gain strength and achieve milestones when they are verbally encouraged by others, particularly among those with which they have established a healthy attachment (Bandura 1995). Social persuasion predicts educational and occupational self-efficacy in inner city, Hispanic-American adolescents (Chin & Kameoka, 2000). The authors examined 107 Hispanic adolescents between the ages of 10 and 13 in an inner city school about their self-efficacy beliefs regarding educational and occupational achievement. Three sources of self-efficacy information were used; namely, vicarious beliefs, prior performance, and social persuasion. The study revealed that social persuasion scored highest on educational attainment for the students. In tandem with theories of attachment and self-efficacy, the adolescent is characterized with how the individual views himself and how others view them. Peer influence is particularly important to the adolescent and is impacted by positive messages they receive especially from their loved ones (Chin & Kameoka, 2000). This study shows the importance of utilizing encouraging words that will facilitate school engagement among the pregnant and parenting teens to go to school through verbal persuasion. Bandura (1977, p. 198) argues that “In attempts to influence human behavior, verbal persuasion is widely used because of its ease and ready availability. People are led, through suggestion, into believing they can cope successfully with what has overwhelmed them
in the past.... Although social persuasion alone may have definite limitations as a means of creating an enduring sense of personal efficacy, it can contribute to the successes achieved through corrective performance”.

Martin and Jackson (2002) examined the opinions of 38 successful adults who used to be in foster care and found out from these former clients that positive encouragement from caregivers was instrumental in achieving positive educational outcomes. Seventy-four percent of the 38 interviewees pointed out that they benefited from the foster care staff that took keen interests in their academic lives and consistently urged and encouraged them to do their best academically. This study is particularly significant in understanding the impact of child welfare staff showing support, having high expectations, and showing interest in pregnant and parenting teens’ educational lives can be a motivating force.

According to Bandura (1995), people will most likely be motivated to engage in activities when they are socially supported and verbally encouraged. Social persuasion renders people the capability to cope more effectively in the face of problems and challenges due to personal deficiencies. People’s sense of self-efficacy is increased when they are encouraged to engage in an activity. Social persuasion allows people to believe that they can have success through their own efforts if they persevere. One’s self-efficacy tends to increase when a person receives inspiring words as in encouragement; whereas one’s self-efficacy is likely to decrease through negative words or discouragement. “If people receive realistic encouragement, they will be more likely to exert greater effort and to become successful than if they are troubled by self-doubts” (Wood & Bandura, 1989, p. 365).
Convergence and Summation of Key Theoretical Perspectives

Pregnant and parenting teens in foster care face many obstacles. These obstacles range from adverse childhood events, adolescent developmental problems, stigmatization and devaluation of being in foster care, and psychological problems. Some or all of these problems may contribute, one way or the other, in their lack of school attendance and engagement (Laser & Nicotera; Stein 2006; Smyke 2010; Vaca 2008). The identity, attachment, and self-efficacy theories discussed above further help frame and explain PPT’s school engagement and disengagement.

There are many parallels and convergences within the theoretical perspectives examined that provide an underpinning for understanding their issues of concern for pregnant and parenting teens in foster care. According to Bowlby (1963; 1969) an essential factor for optimal child development is that the child remains connected to a caregiver, especially to the parent. At an early stage, the child is wired to seek protection, proximity, and dependence of basic needs from the caregiver. When the child’s expectations are fulfilled, a secure attachment is developed due to caregiver’s consistency, availability and dependability to respond to the child’s needs. Secure attachment allows the child to take on risks and explore the world. The child grows to be confident and develops a positive sense of self-identity, capable of trusting others.

We see a convergence of Bowlby’s attachment theory with Erikson’s (1968) theory of Trust v Mistrust where the baby learns to form a sense of basic trust proven by the mother’s dependability of providing the needed care for the child. The child needs this basic fundamental trust to successfully learn how to trust other adults and other people who come into his or her life. When this trust is broken due to inconsistencies with her early child caregiver or parent, developmental achievements are often not achieved. Healthy identity development then ensues.
when the infant recognizes the mother who provides her child with the basic essential needs such as food, comfort, and a nurturing environment.

According to Bandura (1997), self-efficacy is a belief in one’s competence. A belief in one’s capabilities of performing with the knowledge that success is possible and is contingent on having a positive self-identity (and this is often contingent upon healthy attachment patterns with trusting adults). Wood and Bandura (1989) posited that “If people receive realistic encouragement, they will be more likely to exert greater effort and to become successful than if they are troubled by self-doubts” (p. 365).

According to the major tenants of the theories reviewed here, creating a nurturing and supportive environment in foster homes and promoting positive attachment relationships with a trusting caregiver will cultivate positive identity and self-efficacy. These conditions, will likely, in turn, increase school attendance and engagement among pregnant and parenting teens.

**Aims of Research Study**

This researcher studied multiple conceptual frameworks, namely attachment theory, identity theory, and self-efficacy to understand possible underlying reasons for the lack of school engagement among pregnant and parenting teens (PPTs) in foster care, and how these frameworks may shed light on what factors could promote it. Although many studies have shown how positive attachment, identity achievement, and self-efficacy may impact positive educational outcomes, there are still some glaring gaps in the existing literature on how those
theories explain pathways to educational outcomes among PPTs in the foster care system. First, existing literature on attachment, identity, and self-efficacy modalities that elucidated how educational engagement is promoted do not address how perceptions of covert and overt racism impact PPTs engagement and motivation to complete a high school education. A gap remains in the literature in exploring the effects of macroaggressions, racism, racial disproportionality, and disparities, and the contributory factors to ongoing school apathy. Perceptions of foster care stigmatization and stereotyping are embedded in racial profiling beliefs, which may also account for the lack of school engagement (Sue & Sue, 2008; Roberts, D., 2002). Another gap in the literature that needs further exploratory, is PPTs’ perceptions of stereotyping by foster parents, staff, and teachers influence school engagement and educational outcomes.

This section examines the above-mentioned racial concepts that contribute to a gap in the literature. The racial concepts cannot be considered alone, as studies that examine interaction and constellation of these racial concepts, coupled with the aforementioned tenets of the theories explained above will inform a better understanding the concerns of PPTs’ lack of school engagement. Specifically, this study will look critically into racial disproportionality of the child welfare system, critical race theory, and issues related to stereotyping to better understand and inform on the experiences of children of color that are not addressed in the context of attachment, identity, and self-efficacy theories. Our lack of understanding may be contributory factors to lack of school engagement and positive educational outcomes for the disproportionate number of youth of color in the foster care system.

**Child Welfare Racial Disproportionality**

The over-representation of African American children in the foster care system is a destabilizing concern for the society. Courtney and Skyles (2003) define child welfare racial
disproportionality as the overrepresentation of certain racial groups in the child welfare system at different service points as opposed to the overall representation of children in the general public. Richardson and Derezotes (2010) further stress disproportionality as “The overrepresentation of a certain group (i.e., race) and is the percent experiencing a unique event (e.g., foster care) compared to their percent of the population” (p. 324).

In 2000, the U.S. Census recorded that African Americans represented 12.8% of the total U.S. population, yet, African Americans represented 40% of the foster care population in the United States. In 2014, statistics still show racial disproportionality remains a concern, albeit some notable improvements. The U.S. Census recorded that year that African Americans made up 13.2% of the entire U.S. population while they represented 24% of the of the foster care population. This is in sharp contrast with Caucasians who represented 77.4% of the U.S population in 2014, but only 42% of the foster care population. Patterns of racial and ethnic inequity have been observed in the foster care system, and many studies have found referrals and service disparities among children of color (Garcia, Palinkas, Snowden, Landsverk, J., 2013; Courtney et al., 2007). African American children spend more time in foster care and are less likely to be adopted than Caucasian children. Likewise, African American children have a 23% greater chance of reentry into the foster care system than all other children do (Courtney et al., 2007). According to Courtney and Dworsky (2010), African American teens have a higher rate of becoming pregnant than non-Hispanic Caucasians.

Data collected on teen parents from the Child Care Review Services of the New York City Administration for Children’s Services showed that as of March 2016, African Americans represented 55.9% of the parenting teens in the New York City Child Welfare System; Hispanics represented 37%; Caucasians represented 3.8%; other, 0.9%; and unknown, 1.9% (CCRS, 2015).
Data on teen parents in school and in the NYC foster care system demonstrate a stark case of disproportionate representation along ethnic lines, with only 42.9% of African Americans going to school, compared to 75% of Caucasians and 57.5% of Hispanics (CCRS, 2015). Clearly, these statistics show that more research is needed to understand 1) why teens of color are more likely to become pregnant than their Caucasian counterparts, and 2) how their disproportionate representation in the foster care system influences their motivation and engagement to complete a high school education.

**Understanding Racism and Critical Race Theory**

The questions one may ask are: 1) How do the issues of racism—as evidenced in racial disproportionality and disparities in services—influence the PPTs’ perceptions of self-devaluation and lack of self-efficacy that subsequently affect educational outcomes? 2) How do the perceptions of racism impact the therapeutic and professional relationship between social service staff of the dominant race and PPTs of color?

Clark, Anderson, Clark, and Williams (1999) define racism as perceptions, behaviors, and actions that disparage or put down certain groups of people as not having any value. According to the authors, perceived racism among African Americans is viewed in terms of being entrenched in the experiences of living in poverty, and from lack of housing, ill health, and lack of proper health care, and poor education. DiAngelo (2012) stated that “Racism encompasses economic, political, social, and institutional actions and beliefs, which systematize and perpetuate an unequal distribution of privileges, resources, and power between Caucasians and people of color” (p.87).
Sue (2010) described covert racism as microaggressions which are implied and inconspicuous ways of putting down people of color and other marginalized groups, and which ultimately impact several aspects of their lives, such as education and overall well-being. Racial microaggressions, as defined by Sue, et al. (2007) are “…brief and commonplace daily verbal, behavioral, or environmental indignities, whether intentional or unintentional, that communicate hostile, derogatory, or negative racial slights, and insults toward people of color” (p. 271).

According to Thompson and Neville (1999), the structural components of racism, such as education, legalities and law enforcement, and even the deplorable living conditions of people of color—as evidenced in the Indian reservations and the ghetto—are designed to keep African Americans relegated to the background and with a sense of hopelessness and failure. With statistics showing the disproportionate representation of PPTs of color in foster care—in general, and specifically in the New York City child welfare system—it is incumbent upon us to examine how the issues of racism may impact the PPTs’ perceptions of self-devaluation and lack of school engagement.

Many studies have shown that African Americans and other marginalized groups are constantly subjected to microaggressions by therapeutic professionals of the dominant race (Constantine, 2007; Shelton & Delgado-Romero, 2011). In fact, many studies show that most therapeutic professionals are Caucasian (Pantalone, Iwamasa, & Martell, 2010). Perceptions of racism or microaggressions from therapeutic staff of dominant race can affect efficacy and beliefs, which may undermine school engagement among PPTs’ of color. According to Sue et al. (2008), both counseling and helping professions are cognizant of how significant it is to be culturally competent in order to work effectively with people of color. The author further implied
that black Americans have experienced microaggressions that portray them to be inferior intellectually and that subsequently affects their mental health.

Garcia, Circo, DeNard, and Hernandez, (2015) sought to understand the obstacles in ensuring foster children of color receive effective mental health services from the perspectives of case managers. They found that cultural competency training for staff and positive engagement between foster child and staff minimized racial disparities regarding the delivery of services. Hence, one can surmise that staff’s lack of cultural competency training and a disengaging helping relationship can impact PPTs’ school attendance. According to Kools (1997), biases and stereotyping from foster caregivers, clinicians, and staff cause stigmatization that impacts adolescents’ identity. The downstream effect of staff biases, racial or non-racial, may have deleterious effects on PPTs who are already saddled with emotional issues that prevent them from going to school. Issues of overt racism, as evidenced by disproportionality in the child welfare system, disparities in child welfare services, and covert forms of racial microaggressions, undoubtedly can impact PPTs’ acceptance or usage of services that are aimed at achieving positive attachment, identity achievement, and self-efficacy – all of which are theorized to influence educational engagement. Carter (2007) added that it is not uncommon for the media, science, and social policies to communicate messages of racial slurs and stereotypes that people of color have to endure. The author further postulated that experiences of racism do impact developmental processes.

Critical Race Theory (CRT)

One of the areas of research that remains largely under researched is how racism may influence PPT’s attachment, identity, and self-efficacy, which are all theorized to influence educational engagement and positive educational outcomes. This research study relies upon the
Critical Race Theory framework to explore and gain insights to the experiences of racism that pregnant and parenting teens of color in foster care are likely to experience, and how this may impact school engagement.

**What is Critical Race Theory?** Solórzano (1997) explained CRT as a “framework or set of basic perspectives, methods, and pedagogy that seeks to identify, analyze, and transform those structural and cultural aspects of society that maintain the subordination and marginalization of people of color” (p6). According to the author, CRT rests on the premise that racism is pervasive and unending in the American society and recognizing that overt and covert racism has an aggregate impact on both the individual and the larger group in which the individual belongs.

The CRT movement began during the early 1970’s when legal scholars, activists, and prominent lawyers in the United States became awakened to the fact that Civil Rights advances and progress which began in the 1960’s had halted (Delgado & Stefancic, 2012). According to the authors, early proponents of CRT, such as Derrick Bell, Alan Freeman, and Richard Delgado, realized the need for innovative strategies and theories to fight the more subtle forms of racism like microaggressions which were stealthily encroaching and taking grounds within United States Society. Critical Race Theory started also as a negative reaction to lack of critical legal studies in addressing the impact of racism within the United States legal system.

CRT uses a critical lens to identify existing power dynamics and structures that promote the discrimination and stereotyping of people of color among the dominant color (Solorzano, 1997). Employing CRT in this study allows the researcher to identify power dynamics and elements of racial microaggression engrained or embedded in micro and macro child welfare practice. These elements will be illuminated by the narratives and subjective experiences of PPT’s of color. To this effect, the aims of the research are:
**Research Aims:**

Aim I: To illuminate how the experiences of pregnant and parenting teens who have aged out of foster care influence their engagement in school and educational outcomes.

Aim II: To determine to what extent attachment theory, identity theory, self-efficacy, and critical race theory explain and illuminate barriers to and facilitators of promoting school engagement and positive educational outcomes for PPTs.

Sub Aim II: To explore—from the perspectives of PPTs—what factors influence self-efficacy, attachment, and identity achievement; and whether and how these internalizing behaviors and emotions influence school engagement and educational achievements.

Aim III: To determine whether the aforementioned internalizing behaviors and emotions and subsequent lack of school engagement are influenced by their subjective experiences of racial microaggressions and perceived racism by social workers, caseworkers, and/or caregivers while in foster care.

**Rationale and Significance of Research Study**

The staggering disproportionality and disparity among children of color in the foster care system is a phenomenon that cannot go unnoticed, unquestioned, and unanswered. Although many studies have looked generally at the intersection of racism and the child welfare system and how it influences children of color’s outcomes, the effects of racism, stereotyping, and stigmatizing attitudes toward pregnant and parenting teens in foster care have yet to be explored. According to Roberts (2002), racism, cultural stereotypes, and stigmatization proliferate in the foster care system. The author further states that foster care professionals and staff are often influenced by society’s common stereotypical images and parlance of the black foster child.
The rationale and significance of this research study is to deconstruct the meaning behind the pain, origins, and underlying factors that contribute to school disengagement among PPTs in foster care—and to empower PPTs to be authors of their own interventions that will maximize positive educational outcomes. Identifying the interplay of power dynamics and microaggression from their subjective experiences, this research study will be able to analyze and identify ways to transform the structural systems that perpetuate stereotyping and marginalization of some of our most vulnerable youth and young adults. In collaboration with PPTs, the research may highlight ways to build nurturing and caring environments that link positive internalizing behaviors and emotions to school engagement and successful educational outcomes.
Chapter III: Methods

The purpose for using a qualitative research approach was to gain insight into aged-out pregnant and parenting teens lived experiences and find meaning of how these experiences shaped their perspectives of educational milestones. A qualitative research approach, particularly, in-depth and semi structured interviews, was used to gather information from the pregnant and parenting teens. Through this qualitative approach, aged- out pregnant and parenting teens reflected on their lived experiences and perspectives and discussed factors that influenced school engagement, including but not limited to: quality and nature of attachment to caregivers, perceptions of identity and self-efficacy, and experiences of racial microaggressions and racism. Data were analyzed through grounded theory. Grounded theory methods, according to Charmaz (2006), consist of “systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories grounded in the data themselves” (p. 2). This chapter describes the recruitment strategies, data analyses, and reflexivity of this research.

Recruitment Strategies

The researcher relied on purposive / non-probability sampling of pregnant and parenting teens that had aged out of foster care within the past ten years. The researcher recruited participants from an agency in New York City that works closely with current and aged-out foster youth to develop their literacy skills through writing their life stories. The researcher emailed research flier to the agency’s editor of youth stories who referred interested participants to the researcher. In concert with snowball sampling, as participants felt comfortable during the interviews and trust was established, they referred other friends or contacts who might be interested in sharing their experiences. Potential recruits contacted the researcher via email or telephone to schedule interviews. The researcher screened twelve potential recruits via phone to
ensure that they met the inclusion criteria. Eleven out of the twelve potential recruits participated in the interviews. A majority of the participants rescheduled initial appointments. During the interviews, they reported that they were initially wary of speaking to researcher who works with the child welfare system and who would likely raise issues about their past trauma.

**Setting and Sample Description**

Out of the 12 participants who contacted the researcher to participate in the study, one of them cancelled and did not reschedule, rendering a total sample size of 11 pregnant and parenting teens. They were between the ages of 22 and 31 years old and the median age was 23.9 years old at the time of the interviews. Over half (n=6) of the sample reported that they were Hispanic or Latin American. The remaining participants disclosed they were Black or African American (n=2), mixed races of White / African American (n=2), or mixed races of African American / Hispanic-Latino (n=1). Over half (n=6) did not complete a high school education. Four participants earned a high school diploma or GED, and one had completed 1 year to 3 years of college. Ten participants identified as female and 1 participant (n=1) identified as other.

Participants had aged out of foster care within ten years at the time of the study. The setting of the interviews depended upon the availability and the preference of the research participants. Participants chose a location most comfortable for them to talk and express themselves freely. Interviews settings ranged from participants’ homes, libraries, and eateries and lasted between 20-71 minutes.
Inclusion and Exclusion Criteria

Inclusion criteria were pregnant and parenting teens that had aged out of foster care within the past ten years. The rationale for using participants that had aged-out of care in the past ten years was to ensure that participants were able to remember to a good degree, their experiences in foster care. The researcher also conducted a short preliminary interview on the phone about their school engagement while scheduling interviews to verify eligibility.

Pregnant and parenting teens currently in foster care were excluded from the study. The rationale for utilizing aged-out foster care was also to ensure that participants were at a stage in their lives where they could reflect upon the barriers and facilitators they experienced about school engagement. Pregnant and parenting teens who appeared to be under the influence of alcohol or other substances were also excluded so as to avoid collecting unreliable data. This factor would have excluded people but the researcher did not exclude anyone as none of the participants was under the influence of alcohol or other substances. Research participants were given the option to withdraw from the study at any point during the interview.

Analysis

The research interviews began after approval from the University’s Institutional Review Board. Semi-structured interviews were conducted, with the guidance of an interview guide (See Appendix A) to help frame the discussion. Interviews were audio-taped and transcribed by a professional transcriptionist. Next, the researcher went through the transcribed data twice while replaying the audio recordings to check for any errors and ensure accuracy with the transcribed data. The data were then coded manually and line by line by the researcher. In concert with Grounded Theory, the researcher began initial coding by staying close to the data and being open
to searching for and identifying any possible themes and categories (Charmaz, 2014; Strauss & Corbin, 2008). Initial coding was meticulously conducted to ensure that they fit and were pertinent in describing the data.

Upon completing the initial coding of each transcribed interview, the researcher created a table with all the initial codes. The researcher manually generated a frequency table by systematically numbering all the open or initial codes, assigning the same numbers to codes with recurrent pattern and shared meanings. In line with focused coding (Charmaz, 2014), the researcher rearranged the coding table using color coding to sort out the initial codes assigned with the same numbers and which shared similar analytic concepts. As explained by Charmaz, this process allowed the researcher to use “the most significant and / or frequent earlier codes to sift through and analyze large amounts of data” (p. 138) for all of the 11 transcripts. Next, the researcher grouped all the focused codes to explore similar patterns, and to compare and synthesize data. Four emergent themes developed from the data and out of the emergent themes, categories and sub categories were developed and organized. Throughout the initial coding and analysis of the data, the researcher re-read the full transcripts and took memos, as it was paramount for researcher not to miss any pertinent information from the narratives that pregnant and parenting teens shared as that would mean missing meaningful emergent themes. Memo-writing from onset of initial coding was particularly helpful as it guided researcher in forming ideas, codes and categories.

**Compensation**

The researcher compensated each participant $30.00 in cash for their time, travel, and as an incentive for participating in the study.
Ethical Consideration

The researcher received approval from University of Pennsylvania’s Institutional Review Board (IRB). The risk for participating in this research study was minimal. Details of the research was explained to interested participants before they agreed to participate in the research. A Consent Form approved by the IRB was distributed to each participant, and the researcher explained the purpose of the study, as well as potential risks and benefits of participation. Participants could withdraw participation at any time during the interviews.

The researcher also informed participants before the interview that if they became uncomfortable or upset during the interview, they would be provided with referrals and phone numbers of individuals and agencies that could provide additional support and resources. The researcher reiterated that the interview would end in the event they displayed any intense emotional reaction from retelling their stories. None of the participants displayed discomfort or requested referrals for services during or after the interviews.

The researcher informed participants prior to commencement of the interviews that the entire interview would be recorded and used for research analyses. Participants were informed that the content of the recording would be kept confidential and only accessed by the research team including the University of Pennsylvania faculty supervising the research study. Research participants were informed that although the actual interview may not necessarily help them, the opportunity to share their retrospective and lived stories could be a cathartic and satisfying experience and illuminate ways to better help other youth in foster care in the future. Participants were informed that the study would be used to increase researcher’s knowledge on the underexplored yet compelling reasons that may impact optimum educational outcomes among PPTs in foster care - which may inform policy and improve on best practices for positive
educational outcomes for pregnant and parenting teens in foster care. The researcher explained to participants that information shared would be kept strictly confidential and that participants’ names would be kept confidential and not disclosed in any publications.

All the data obtained from the interviews were kept securely in a locked file cabinet to maintain confidentiality. After the data were professionally transcribed, it was stored and maintained in a locked cabinet in the home office of the co-investigator and only accessible to research team. All identifying data along with audio tapes were destroyed when the project ended.

**Reflexivity Statement**

Potential preconceptions and biases can impact or threaten the integrity of research outcomes. Therefore, qualitative researchers must engage in self-awareness and reflexivity to avoid any encroachment of our preconceptions on the research data. This researcher understands that ongoing reflexivity is crucial for the duration of the research study as it calls for honesty and transparency to ask appropriate and unbiased questions and to analyze and interpret the data. The researcher engaged in self-reflection and self-awareness throughout the research and data analyses processes. As Charmaz (2014) puts it, “Reflexivity includes examining how the researcher’s interests, positions, and assumptions influenced his or her enquiry” (p. 344).

As a professional, I started my child welfare career in casework where I worked with foster youth, including pregnant and parenting teens. These foster youth were placed in foster homes and my work duties included monthly home visits to the foster homes where I heard many complaints about youth not attending school. As a social worker in a group home, many of the youth on my caseload ran away from the facility repeatedly and some returned pregnant.
Running away or “awoling”, was a major problem in the group home where I worked. I engaged wholeheartedly in counseling and relationship building with these youth, but I could not stop them from running away. Occasionally, some of my clients expressed their desires to become pregnant and have children to love and be loved by them. In hindsight, I wish I had delved into these strong wishes and desires of my past clients. In my work as a social worker, I also observed many conferences and facilitated conferences where decisions were made about removing babies from the pregnant and parenting teens in foster care.

I became interested in this research partly out of a sense of guilt for not having done more for the many pregnant and parenting teens I worked with and for not understanding their core pain and needs well enough to address or develop strategic interventions that best meet their needs. I gained so much knowledge and insight in social work theories in my doctoral program, which was the onset of my trajectory into conducting research among aged-out pregnant and parenting teens to understand how attachment, identity, self-efficacy, and critical race theories may have influenced their school engagement and disengagement.

Working with foster youth can be particularly challenging and in my experience, I have worked with many difficult and behaviorally challenging youths. In all honesty, I have had my share of preconceptions prior to starting my work with pregnant and parenting teens in foster care. Many of those preconceptions came from the case records or psycho-social histories I read before meeting the clients.

In the role of researcher and not a social worker, I interviewed these pregnant and parenting youths without reading about or knowing their life histories. My role was to ask questions and probe into their lived experiences. It was very refreshing to listen attentively without wearing the therapist hat or planning interventions. This was a golden opportunity for
me to just listen and hear their stories. Although their pain elicited some guilty feelings in me while coding, I became conscious of my own self-awareness and stayed very close to the data, and made sure that I coded their pain and their joys transparently. Overall, this research calls for child welfare workers and professionals, myself included, to step up and help these vulnerable teens and refrain from stereotyping them as difficult, lazy, not wanting to take advantage of child welfare benefits, and not meeting their educational milestones.
Chapter IV: Results

This section will report the findings of the research study. As indicated in the introduction, the purpose of the study was to understand what factors contribute to school engagement and educational outcomes among Pregnant and Parenting Teens (PPTs) in foster care and to determine to what extent attachment theory, identity theory, self-efficacy, and critical race theory explain and illuminate barriers to and facilitators of promoting school engagement and positive educational outcomes for PPTs.

Eleven Aged-out pregnant and parenting teens were interviewed about their school engagement while in foster care and their educational outcomes. Four principal themes emerged during the one-on-one interviews. (1) “The System Response” theme illuminates the foster care experiences of the aged-out PPTs. Additionally, the System Response seeks to explain the respondents’ perceptions of the caregiving or treatment they received from their foster parents, group home staff, agency caseworkers, school personnel, and the legal system. (2) Following the System Response is Theme 2, “Impact of System Response”. Impact of System Response is an attempt by the aged-out pregnant and parenting teens to elucidate, through their narratives, the effect of the caregiving and treatment they received from the system. (3) Educational Outcomes, theme three, explains how the systems response and impact of systems response worked together to influence the educational outcomes of the pregnant and parenting teens. (4) Lessons Learned, theme 4, touches on the respondents’ perceptions of some of the values learned while in foster care and despite the struggles and challenges faced by them. These four main themes together with their related categories, sub-categories, and supporting quotes will be discussed.
THEME ONE: SYSTEM RESPONSE

During the interviews, Aged-out Pregnant and Parenting youth spoke at length about their perceptions of the “System Response” to their foster care and overall human needs. The system includes the foster home, foster group home, foster agency and institutions. The System Response Theme has three main categories, namely; (1) Negative Perceptions of Caregiving by Foster Home, Group Home, and Institutions, (2) Positive Perceptions of Caregiving by Foster Home, Group Home, and Institutions and (3) Perceptions of Discrimination and Racism. Within each main category, there are sub-categories.

Category 1: Pregnant and Parenting Teens’ Negative Perceptions of Caregiving by Foster Home, Group Home, Institutions & Birth Family

Aged-out foster care youth spoke about their experiences in care as primarily negative. In fact, all eleven respondents described their experience in foster care as difficult and challenging. Many stated that their experiences in foster care as pregnant and parenting teens were experiences that they would never want to repeat nor wish for their children to go through. Within the category of negative perceptions of caregiving, sub-categories emerged, including: aged-out PPTs experiencing feelings of being hospitalized; yearning for family belongingness; and unsupportive foster parent, group home, agency and school staff.
Category 1:1: Feelings of Being Hospitalized

Aged-out PPT compared the atmosphere in the group home to that of a hospital environment. PPT described a demand for order, impersonal touch, and being expected to abide by the rules. Respondents described life in foster care as very regimented.

1:1:1: Regimented Life:

The strictly regulated and regimented life experienced in foster care, according to respondents, had a negative impact. The following excerpt is a poignant depiction of how the pregnant and parenting teens perceived the group home caregiving environments.

“The group home is just like, it’s kind of like a hospital environment. It’s like everybody’s in a room, you’ve got this scheduled time and where you’ve got to go to bed. It just is not really so much of a family home. It’s more just like a group home” …You feel like a patient. You feel like, alright, let me just hurry up and get out of their face real quick” …It was just like a regular routine…everybody get up at this time, like it wasn’t a loving connection. It wasn’t nothing like that. It was more like work staff, you all are the patients and do what you’ve got to do”.

Category 1:2: Yearning for Family Belongingness

The foster care environment, as described by many respondents, lacked the semblance of family home living. PPTs described having abnormal and visitor feelings while living in foster care. PPTs also described life in foster care as having a non-familial environment and talked about certain unconducive and remote placement locations that made them yearn for family belongingness. PPTs also talked about peer disagreements in foster care, all of which caused them to yearn for family belongingness.

1:2:1: Abnormal Feeling:

Living in a group home and foster home was described by some of the aged-out foster youth as abnormal and uncomfortable. Some described school as a place where they found respite
and fellowship with friends. Below are two quotes that show the aged-out pregnant and parenting teens’ unhomely and negative feelings they experienced in some of their foster care placements.

“*You don’t feel normal being in a foster home. You definitely don’t feel normal living in a group home*”

“In my case, school was a getaway, cause that’s the only place that I felt normal”

One youth commented that even though she did not like going to school, being in school to be with friends was a better option.

“The reasons why I used to go to school honestly is to, to be with my friends to be happy. Like, I like to be happy. I don’t like to be down, I don’t like to be sad. I don’t like to cry. So when I used to be with my friends, I used to be extremely happy. I used to laugh you know, and I used to like that time. That’s the only reason why I went to school because I never used to go to class, really, so yeah”.

1:2:2: Visitor Feeling:

Another youth described the foster home atmosphere as though one was a visitor, with no permanent status and only staying until the visiting time ended.

“I didn’t really feel comfortable in the home because you do feel like a visitor, like you don’t know how long you’re going to stay, you don’t know, you know, what little thing could just make the parent want to get rid of you. So it was like one thing that I did try to put all my focus to, was just going to school. So that was like my biggest like motivation...I’ll just go to school and spend the day there and you know when I come here, just like eat dinner and you know go to sleep and just repeat the process. So that was just like kind of like an everyday thing for me, and then my son was in school so he was able to be in school the whole day, as I was also”

1:2:3: Non-Familial Environment

Foster homes are temporary placements, meant to provide a seemingly familial and nurturing environment for children. This is crucial for the emotional, social, and psychological
well-being of foster children who have been removed from their homes of origin. This is true no matter how unconducive their birth or family homes were prior to removal. Participants spoke at length of their yearnings to find or live in homes that felt like the true sense of home. The following excerpts portray many of the respondents’ yearnings for a home-like environment.

“I felt like, when my friends was talking about that they were going out to eat with their family… and hearing my friends say they’re going home to their mom, they’re going home to do this and knowing that I’m not going home to do that, it hurts”.

“When you see all the staff, and then they’ve got the doctor there [PPT is talking about psychiatrists, psychologists, counselors] and, you know, like the counselors and all that, you kind of get the sense of, okay, this isn’t home, like this is, you know, yeah, it’s not home. It’s a group home”.

“The only thing is like you always had to be guarded on what you said. Like it’s like you can’t really say how you really feel because you’ve got to worry about oh they might send me to a hospital, they might—[talking about agencies’ psychiatrists] You know, it’s not like when you’re sitting down talking to your mom how you could say ‘mom, listen, this is like this is what’s going on,’ and she’s going to listen with open ears, and be understanding and, of course, protect you, but, you know, be able to listen”.

1:2:4: Geographical / Physical Isolation:

One respondent described the system’s shortcoming where the youth was placed in a distant location, away from home and from familiar grounds because a local home was not found. Her feeling of being alone, abandoned, and isolated by geographical location is clearly expressed in the quote below:

“Umm when I actually had [baby’s name omitted], after everything, it was kind of a hustle because they couldn’t find any foster parents that would take a pregnant, a young teen with a baby. Cause, you know everybody looks at that like, uuh she’s young and pregnant, so basically they sent me to a home that was all the way in Middletown, New York. My family was not out there…… So um it was like kind of a real big struggle, cos, it was just like they had me somewhere, where I’m so distant from my family, I can’t even go to my family and be like, this is what I’m going through, or just get a break from the house and get to my family, cos if you have me all the way in Middletown, New York, Up -State, there’s no transportation, there’s no, no type of nothing and the lady will just go to work and just leave me and [baby’s name omitted], there”.
Structural living and sleeping arrangements with other foster children posed many problems for respondents while they were in care. The challenges of just being a pregnant or parenting teen in foster care were complicated by inadequate or ineffectual pairing of foster children in the foster homes and group homes.

“I was 16 at the time, and it was, it was a kind of a struggle, because they had me living in um something called [name omitted], it’s a maternity shelter for pregnant teens and it was, it was no good. They basically had you sharing a room with another girl, sometimes your stuff would be stolen, um these girls wake up with different hormones, everyday its constant fights, it’s constant, foolishness every day”

“The foster kids, I couldn’t, I loved them at times but their attitudes and their disrespectful ways, it just really drew me to that line where I was really, really, short tempered and in order for me not to be locked up, let me remove myself. I was losing my patience with them. I was losing it when they were stealing from me, I was losing it when one of them tried to put her hands on me. I had a 14 year old foster sister, who tried to put her hands on me at the time… I will tell my social workers, they still kept me in that foster home. Oh there’s nothing we can do [the social workers]”

Category 1:3: Unsupportive Foster Parent, Group Home, Institution, and Birth Family

All the respondents spoke about experiencing lack of support while in foster care. Lack of support ranged from a wide spectrum of financial, physical, psychological, and emotional support. Aged-out youth shared their experiences about childcare issues, uncaring foster parents and staff, numerous foster care placements, foster parents and staff only working for money, fears of threat of Child Protective Services’ removal of their babies, and system’s disregard for teen moms.

1:3:1: Uncaring Foster Parents and Staff

Aged-out pregnant and parenting teens cited going hungry, lacking basic needs, and being subjected to harmful chores. Foster care institutions are provided with subsidies from the
federal and state government for the care and maintenance of foster children. However, respondents described being hungry and lacking basic needs in care. Below are two narratives of participants’ experiences of institutional caregiving:

“Sometimes, I didn’t have panties, sometimes I didn’t have socks,… and it hurts because I really wish like I could really say something to somebody and say like, did you check this home [implying if the foster home was properly vetted before placing foster children in]? And it’s sad because you know, you [implying child welfare system] take us away from our mom that you say is negative to us, that probably nine times out of ten, never let their kids go without panties or socks…

“..It’s like they made a big deal out of us eating, or me eating 2 packs of oatmeal but if I was skipping lunch then I felt that the two packs of oatmeal will keep me full from coming from [school name omitted] all the way back to [name omitted] to pick up my child.. You know, like I really used to go to school hungry”.

One respondent talked about how she was subjected to harmful and toxic chores during her pregnancy. She was told by her foster parent that everyone else in the house had to do similar chores, so she had to do the same despite her pregnancy.

“Umm but being pregnant in foster care it was an experience that I wouldn’t want to go through again. Because some foster parents didn’t really care, they would try to make you do more than what you actually can… like one of my foster parents, while I was pregnant with my daughter, she wanted me to be around chemicals, cleaning the bathroom, stuff that I can’t inhale, stuff that I shouldn’t be around, and she wanted me to continuously do it when there’s other people there that can”.

Some respondents also talked about being of high risk and feeling extremely tired with the pregnancy. Respondents talked about inconsistencies in school attendance and some dropping out of school. Below is an excerpt from one respondent.

“I had actually dropped out of school when I was pregnant with [child’s name omitted]. I was extremely tired. I would try at the beginning of my 11th grade year to go to school but it was really hard because I was extremely tired, extremely sick so that actually affected me…”
1:3:2: Ineffective Communication

Effective communication is key to building and sustaining relationships. It is a significant element in creating a peaceful ambiance, necessary for growth and development. However, indirect communication is ineffective and can be emotionally and psychologically detrimental for pregnant youth and teen moms who are already faced with the emotional and daunting task of motherhood. One participant recalled her painful experience of coming back from school to find a garbage bin at the front of her door and how she began to cry “hysterically”. When asked what that bin meant, she explained that the bin at her door was for her to pack her belongings as she was being moved to mother-child facility that had already been discussed with her. According to the PPT, it would have been less traumatizing if she had come home from school, relaxed, and then had staff come to her with the bin to pack her things. While the main issue here is the pain the PPT felt around how staff handled her leaving the group home, it is also noteworthy of the unquestioning medium in which respondent had to pack all her belongings - the bin.

“I came home from school and they had a bin outside for me waiting at my door. And I don’t know if it was the hormonal, but I started crying hysterically, cause, I felt that wow, hey, you guys are pushing me out. You didn’t even give it to me in my hand, like you know, it reminded me once again, I’m just a case. Okay, so case number bla-bla-bla got pregnant so let’s put a bin in front of her door. That bin [garbage bag placed at her door] means to leave. Pack your stuff and go. Like I felt like I was getting kicked out. Yeah I felt um to me it was a sign of rejection. I would have preferred them to wait till I get home, and to relax, you know, and then say ‘[name omitted], you know here’s the bins’ cause you know…if it was handled in a different way, It wouldn’t have mattered. Talk to me, give it to me like a person, don’t just throw things in front of my door”.

The following excerpt also shows tactless communication that one of the respondents endured in the group home. The respondent also recounted feeling hurt and confused at when a staff member came to her room, saw her high school diploma and commended her for that, but then looked over at her son and conveyed implicitly about her not being smart on one thing, her son.
“… they [staff] saw my high school diploma, ‘oh you’re really good, you’re doing really good’ [stated staff]. And they’re like, the only thing you wasn’t so smart about, and they looked over my son, so it was like I was confused.”

Another respondent talked about the “silent” communication she received at the hands of her foster parent. Respondent used a verbal graphic illustration to effectively communicate how she felt and about the lack of communication she experienced in her foster home- to her, foster mother’s silence was like being locked in room:

“I was going home to a foster mother that locked me in a room, locked me in a room by myself, like she barely talked to me, she barely spent time with me…”

Another respondent talked about experiencing language barrier issues for a year without agency staff resolving it. Respondent described her difficulty living a year with a Spanish speaking foster mother who spoke no English while the foster youth spoke no Spanish. This youth was placed in that home because she had a Spanish last name and so it was assumed that she spoke Spanish.

“They read my last name and they seen [Spanish last name omitted], so they thought oh she’s Spanish, so we can place her with [foster mother’s name omitted]. She’s Spanish but not knowing [foster mother’s name omitted] doesn’t speak any English. So you have me in a household, where the lady speaks no English and I was living like that for a year. She spoke no English at all and it was like… you don’t even know what she’s talking about, you don’t even know what she’s saying. So that’s uncomfortable”.

1:3:3: Lack of Academic Support

There were some respondents that reported that they felt no need to attend school since they received no push from their foster mothers.
“I didn’t go to school whiles I was in foster care and I was pregnant but um what didn’t motivate me is the foster parent didn’t push me so it was like um if I stayed home, she wouldn’t push me so I just stayed home”.

1:3:4: Lack of Childcare Support from Foster Parents / Group Homes:

Childcare is a critical issue worldwide, including in the United States. Childcare problems pose as a crucial educational concern for foster care teen moms as evidenced in the narratives of the respondents. An overwhelming majority of the Aged-out foster care respondents described their struggles finding appropriate childcare help and being able to attend school. Some of the participants had to look elsewhere for childcare even though foster parents were stay- at -home parents and could have provided care. The quotes below highlight some of the childcare struggles the respondents faced while they were in foster care:

“Well, for foster parents who weren’t, who were not working, they were being paid through the Agency to take care of our kids while we go to school or work only. So being that some of them who were being paid, I mean who were not working and being paid to you know take care of my son, they [foster parents] felt like – ‘this is not my child why should that be my responsibility?’ -so that um, not having enough child care resources or lack of the child care resource really affected me with school and work”.

One of the respondents explained that some foster parents refused to assist in child care to deter other foster children in the home from the misconception that having babies and getting childcare assistance from foster parents was expected.

“..the foster parent you know, even though they was getting paid, you know they, they felt like … like if they did it that way, then everybody in the home [other foster kids in the foster home] could have a baby so a part of the foster parents understanding to um from my experience, is that they didn’t want, you know, all the foster children, feel like they just gonna have babies now… they [foster mothers] could help prevent the ones who wasn’t ready for a child…”
Another respondent described her frustration about not receiving adequate childcare support as a teen mom in foster care and being torn between staying home to care for her child and risking the agency’s displeasure of becoming a school dropout.

“There was no progress with my mom and one thing that was discouraging me just going to school which is the fact that I did have a child and it was hard finding child care... The foster mother that I had, she also had another child in the house, so she would have to tend to that child and they [foster care agency] kind of told her like, her kid is her responsibility because my child was not in care, I was in care. So she [foster mother] only received funds for him [respondent’s son], for him being in the house but she was not responsible for him. So that kind of gave her like the green light to say like oh wow - I don’t have nothing to do with that [assisting respondent with childcare], and you know, you [respondent], figure it”

“Yeah, I did explain it [childcare problem] to my worker and it was kind of hard because they [foster care agency] said that if I was able to work, I would be able to pay for child care unless I found a program, because they said, technically they, that was not also their care [meaning not the agency’s responsibility to find childcare from respondent mom’s son]. Like, they could not provide funding for that. So I was just kind of like confused cos I’m like so if I don’t go to school, you guys are going to be on top of me but if I’m trying to go to school and I can’t find somebody to help me with my child, then you guys aren’t ready to try and help me with that either so it’s like it was like a lose-lose type of situation... That wasn’t like really a support. I kind of like just had to like suck up my pride and just like beg my grandmother to kind of just like help me out a little bit more, even though she’s a little older, so you know I feel like if it wasn’t for her then you know school for me wouldn’t have been an option”.

1:3:5: Caregiver Mistrust:

Some respondents talked about experiencing childcare issues based on mistrust of childcare providers. Aged-out pregnant and parenting teens shared their deeply embedded fears of entrusting their children in the care of strangers for fear that their children may suffer similar fates of maltreatment and abuse they underwent in their homes of origin and / or in foster care.

“Yes it was difficult to trust anybody with my children because of the things that I went through growing up. It affected me so now I have that trust issue with my children, leaving them with anybody. I don’t leave them with anybody because I’m scared that
God forbid something could happen to them that happened to me, so I had to protect them”.

1:3:6: Foster Parent / Staff Working for Money

Many respondents talked vehemently and passionately about foster parents taking on the role not for the love of the children but for monetary reasons. They described situations when foster parents were negligent of their needs. Foster parents are paid with monthly stipends for the care of the foster children and until the board checks came in, needs of the youth were put on hold.

Below are quotes from three respondents who described their experiences:

“Um another situation that I can verbally comment, say about, is um, the simple fact that um I feel like foster parents, it’s just about money like and that’s one main reason why I never want my child in foster care because I feel like when people take us away from our mom, I feel like, my mom, you know she, like even like she, her condition, on why I was removed which is drug problems, she still to this day, I can call her any day and I can ask her anything and she gives it to me. Our foster parents will be like I have to wait until my check [the monthly foster boarding stipend], if you’re here to provide um you know a parenting or guidance for me, how you telling me I have to wait until my check, you would want to help that person knowing that they don’t have it. So I feel like a lot of foster parents, it’s about the check and I feel like it must stop!”

“So then, they finally found me a home, but then the lady, she had numerous foster kids at her house and there wasn’t enough space. So it was like, it was a really big struggle cos a lot of these people, they take in these foster kids, no wonder it’s too much for them. And most of the time between me and you, they think about the check and when they are getting paid”.

Going through many difficulties in many different homes helped respondents’ discern between the foster parents who were in it for the money or for the well-being of the foster child.

“I mean, the foster homes, you got some good foster homes, where like, you know, like they’re really supportive and they really are there to be like a second family for you and stuff like that, so I mean, that helps. But then you’ve got also certain families they’re just, you know, they’re there for the money, so, I mean, you could feel it because obviously like they’re not that supportive. Like you can tell when somebody’s in it for, you know, a family situation or because that’s like something they really want to do or if that’s just like, okay, this is going to be a check for me at the end of the week. So, I mean…”
1:3:7: Screening for Foster Parents:

Respondents talked about the foster care system not screening foster parents well. Although all the respondents spoke about having had some good foster parents during their foster care duration, some believed that much more work needs to be done by the child welfare agency to screen foster parents. Two quotes below highlight PPT’s call for effective screening.

“They [foster parents] are not thinking about what these kids is going through, what they've been through….The system is like a little different and a lot of them, like they don’t screen these foster parents right. A lot of them are not screened right at all”.

“Foster care has its good and it has its bad but I do feel like… [Foster care agency] workers needs to observe more. Observe these foster parents more, observe before you put me in this home”.

1:3:8: Fear of Child Protective Services (CPS) Removal of Baby:

Some respondents expressed fear of their babies being removed from their care. This fear of CPS removal of children seemed to be very real and persistent among some respondents. Other respondents had experienced the CPS removal of their babies.

“I had my first daughter at 16 so my first daughter was removed out of my care and I got pregnant with my second daughter…. I was fighting for her, not to get removed from my care because of my first daughter being removed”.

One of the respondents described her entrenched fears of CPS removal of children and stated that she ran away from care when she realized she was pregnant for fear of her baby being removed from her. Having been foster children themselves, participants’ beliefs their children would end up in care led them to run away to prevent CPS removal. Another respondent who
expressed similar fears planned to sign out of care to prevent her baby from being removed but ended up not signing out for which she said she was grateful because it turned out to be erroneous that one’s child was automatically removed with no cause.

“Well, at first I was scared because I thought that they were going to take my daughter from me…so like my first um, I guess, like the first trimester up until like the second trimester, up in the middle of my second trimester, I avoided being in foster care so I’d run away from like my group home…I just had the impression that because I was a foster child, that my child will become a foster child too, so she’d get taken away too”

“…When I realized that I was pregnant in foster care, I was worried about the foster care program trying to take my child away… So I actually expressed to my baby father that I wanted to work on signing out of foster care, but luckily, it never happened.

One respondent talked about how she could neither go to school nor work because staff always called her to come and feed her baby, and threatened ACS involvement if she didn’t come home, because her baby refused to take the bottle.

“I had to stop going to school and stop working because I had to tend to my daughter, because my daughter wasn’t taking the bottle and [group home name omitted] would call me when I’m at school and at work and they would be like, well you need to come home because she’s not eating or we’re are going to call [Child Welfare Agency] on you because she needs to eat and it’s going to look like you’re not feeding your child. So I guess that’s what made it a little harder, in a way, cos I had to stop [going to school and work] for my daughter”.

1:3:9: Teenager Rejection:

Finding placements for teenagers is an ongoing dilemma for the foster care system as many foster parents prefer to have younger children who are deemed easier to handle and nurture. Being a pregnant teenager or a parenting teen can be more challenging while facing rejection from foster parents due to age. One respondent spoke about the culture of foster care and talked about her pain of being rejected and unloved.
“...In foster care, people don’t want to take foster kids who are teenagers or teenagers who have kids. That’s just like a big no to them in the system. Like they do not want to deal with it at all. They’d rather have small children and kid that they don’t have to worry about...”

1:3:10: Numerous Placements:

Aged-out pregnant and parenting teens talked about the pain of going through several foster care placements during their pregnant and parenting years. Respondents talked about how these numerous movements affected their school attendance and also the difficulty these movements caused them and their babies. Below are two quotes of their experiences of being moved several times.

“Being in foster care, affected my education because, I was moved from different homes. I was in twelve different homes from 17 to 21[ages]. So I wasn’t, I was never stable to go to school and get a job to provide for my kid.

“It’s kind of hard because you are just not doing everything for yourself, you are also doing something else for a child. So it’s like you’re thinking like, when I am moved, my child is moved”

1:3:11: Being Judged / Stereotyped:

One respondent talked about being judged by foster parents and foster care staff and not being given the benefit of the doubt. Respondent describes being found guilty before proven innocent.

“I wasn’t accepted at first, the first thing I was told was, when I stepped onto the ground [mother –child group home] was, I hope you’re not gonna AWOL [ran away]...No hi, how are you... that kind of hurt. I just felt like oh, I’m being judged again. I finally felt accepted... but then I kind of got upset too cos I felt like oh, I had to earn it. They didn’t even give me the benefit of the doubt. It was like instead of being innocent until proven guilty, I was guilty before I had to prove myself innocent”
1:3:12: School Bullying:

Some respondents recalled being bullied in schools and mocked for being foster children. One respondent talked about being expelled from school and the difficulty of finding another school due to her record of fighting a peer. A youth talked about finally fighting a peer after a long period of being bullied by the peer.

“… I had money stolen from me from a boy and he was my primary bully. He always bullied me. I let it go for a few times…. He decided to try and put his hands on me one day. We got to fighting and I’m guessing I had so much anger in me…. It’s been reported multiple times that he was bullying me…when you’ve had enough, you’ve had enough. You have every right to defend yourself…. I get expelled… No school wanted to accept me.

“What made me not go to school was I was being bullied and I didn’t know how to handle being bullied and they knew I was a foster child so it made it harder because I was labelled the foster child. Oh look, the foster child is coming, oh the foster child”

1:3:13: Unsupportive Family Court Law Guardian:

One respondent described her Law Guardian as unsupportive and never there to advocate for her needs. The respondent believed that the law Guardian wanted her to fail in foster care.

“I felt that my Law Guardian already had a label for me. I felt like my Law-Guardian wanted me to be a lost case and no matter how hard I wanted to fight not to be a lost case, I felt like it was in her duty to make the lost case out of me and I didn’t like that. I didn’t like her at all. She, she wouldn’t try to help me when it came to court…she didn’t try to work with me when it came to what I wanted….She wasn’t there to support me at all. I felt like my decisions to get to where I am at, were done because of me”.

1:3:14: Negative Perceptions of Caregiving by Birth Family

Some aged-out pregnant and parenting teens described their poor relationships with their immediate families. They reported feeling abandoned, betrayed, and unsupported by their
biological families. They talked about their pain and ambiguous loss of family relationship. The quote below highlights some respondents’ feelings:

“Well, my relationship with my mother has never been good. She likes thinking that ooh she’s perfect at times and she, to this day, at times, she still throws it in my face that I have mental issues. Yes I do have mental issues, yes I do suffer from depression…, but there is nothing I can do besides get proper help from a therapist…. I even had my own mother tell me that I was a waste of sperm, that she regretted having me”.

“…My mom, she was just like, she wouldn’t be home at all. Like, she wouldn't take us to school, like we would like have constant, absent days, and the only person that will try to make sure we went to school was my grandmother”.

Category 2: Positive Perceptions of Caregiving by Foster Home, Group Home, & Institutions

Aged-out pregnant and parenting teens did not just speak about their negative perceptions of the System’s Response but they also spoke about their positive experiences and perceptions of foster caregiving. Positive experiences, as narrated by respondents, ranged from foster parents and staff’s loving and supportive natures to feeling a sense of belonging in a loving environment.

Category 2:1: Generous and Caring Foster Mother / Group Home Staff

Many respondents talked about having foster parents who were very generous and caring. Respondents compared the different homes and different treatments they received, acknowledged foster parents who were caring and loving, and explored how the good treatment positively impacted their lives. One respondent talked about her struggle with childcare in many homes before being placed with a foster parent who was very embracing.

“When I got to [foster mother’s name omitted], it was a little different for me because… she’s like how are you out on the streets with a little baby and you have no phone? What happens if something happens to you and you have to call out? So it’s like every
foster parent is different, like every foster parent is in it for a different reason…. She bought me pampers, wipes, phone bill and, and then she’d give me money on his part [respondent’s baby], money on my part. They’ll drive me, they’ll pay for my child care, like stuff like that. Like I, when I actually got to her house, I was um doing a little bad in school, so like when I finally got to her house, I graduated. And it was like that was like, big for me”

Another respondent described her foster mother as very caring, someone that she interacted with, built a good relationship with and still calls her “mommy.”

There was this foster home that I used to be in. I felt accepted there because the minute I got there, she already had everything prepared for me….Even though it took me a while to call her mommy, I still call her mommy to this day. I still get in contact with her… I used to really interact with my foster mother….I used to… watch WWE[World Wrestling Entertainment] Monday night… it was wrestling, her favorite show that she loves watching Monday nights…”

Category 2:2: Group Home Support

Some respondents described the group home staff as very supportive, attentive, and loving. Some group home staff went beyond the call of duty to help and support the pregnant and parenting youth in care. The following excerpt reveals supportive staff filling the gap as parents for many of these neglected youths.

“They really motivated, they were nice….They had a lot of incentives that helped…. If you didn’t do a chore, you didn’t go to school, you didn’t get allowance and I want money. Hahaha! And they would always have extra chores, like they always kept us um busy but I felt with purpose…. They helped us manage money by doing that…. I didn’t know they used to call every day to make sure we were in school. So I guessed that helped, I didn’t know until somebody asked me. I was a drama major, I had a lot of plays, um I didn’t have my parents there, but the staff member always came or one staff member always came to support me so that was nice”.

Category 2:3: Support from School

With countless narratives about the struggles that the respondents experienced in foster care, receiving support from the school system was crucial and necessary for the pregnant and
parenting teens’ social and academic development. One respondent articulated her gratitude about the school support she received.

“I had some support from you know, some teachers are really good, the guidance counselor, and I was really determined to finish high school”.

Category 2:4: Support from Agency Caseworker / Educational / Vocational Specialist

Many respondents expressed their appreciation for their caseworkers, educational, and vocational specialists who were there for them during their challenging foster care years. Aged-out foster youth talked about some workers going above and beyond in calling frequently to inquire about them and their children and showing genuine concern for their well-being. Many caseworkers were described as true advocates working for the foster child’s interest.

“Umm like I was telling you, um that worker that I had, [name omitted] she always was at my school. If I missed days, she’ll be calling me like umm, I called your school, why are you not in school today? Like little stuff like that to show that you care. She didn’t have to do all if that cuz at the end of the day she’s still getting paid. She got so many other kids that she’s dealing with and she was always picking the phone and how are you doing today? How are you and [son’s name omitted]? Just calling to check on you guys, like, like little stuff like that and like every time I had an issue in school, with attendance, or a foster parent not wanting to watch [son’s name omitted] so I could go to school, she always was there to vouch for me”.

Some respondents shared about the hope they gained that all was not lost by having babies young that was inspired by case workers or educational specialists, and how that hope transformed their educational lives and outcomes.

“...and then there was another education specialist... which I still keep in contact with until today. She supported me a lot through the education. She made me feel like there’s hope and that having a kid didn’t completely ruin your life ‘cos people, not that it’s the best but people do it all the time and they still get to where they want to go...”
Category 3: Perceptions of Discrimination and Racism

Some of the aged-out pregnant and parenting teens discussed their experiences of discrimination and racism while in foster care. They described experiencing discrimination due to their ethnic or racial identity, and sexual orientation.

3:1: Sexual Orientation

One respondent talked about being kicked out of foster home that she had liked after coming out as a lesbian. It was painful for the foster youth that her foster mother liked her but it changed after the foster mother gained knowledge of the youth’s sexual orientation.

“One foster mom, I was in her home for about a good couple months. I openly came out of the closet and told her that I was a Lesbian and I got kicked out of her home so I had to, I had some days to leave her home and she didn’t want me in her home no more. Up until she found out, she was fine with me being in the house”.

3:2: Ethnic Discrimination

Another respondent talked about experiencing ethnic discrimination whereby a foster parent who was of a different ethnicity constantly made references about the foster youth’s ethnicity. Respondent described a scenario about helping out another parenting teen’s baby in the foster parent’s absence and instead of foster parent being grateful and appreciative, she cast out derogatory comments about respondent’s ethnicity.

“My last foster home she, we had our big fall out differences because I’m Puerto Rican, she was Dominican. She didn’t quite like me because you know us Puerto Ricans, we had the advantage. We are very independent. I was very independent…. I was sharing a home with a 16 year old girl, who just had a baby…. I’m sleeping, I wake up from a nap, I heard the baby hysterically crying…. The mother of the baby was too busy getting drugged out in the streets at the age of 16 with guys…. The foster mother was supposed to be there, but she never did. She was too busy. I came in I took over. She, her remark was y’all Puerto Ricans you are always quick to rescue
somebody … She got mad that I sat there, was feeding the baby…. I felt discriminated because she specifically said y’all Puerto Ricans, think y’all can save everybody”

3:3: Racial Discrimination

Another respondent talked about racial discriminatory practices and staff showing favoritism even with the babies of the pregnant and parenting teens in the group home. Mothers and their children were sometimes discriminated against as is represented below:

“She was African-American, she was loud and some staff gets scared, they think if you’re loud then you’re bad, and that’s bias and judgmental. And I saw that she, they treated someone’s son not fair, the black girl that was loud you know, um so they would either not try to bring up certain special job opportunities for them, so like they don’t deserve it this and that. Instead of still trying to give them a chance. Or if they didn’t like the mother, they didn’t like her kid, and you have to watch how they treat your kid at the day care”.

“I witnessed something happen to a kid that I would hope that someone will tell me if they saw something happen to mine… It was tough cause I felt like attacking the staff, maybe they felt I shouldn’t have told on them because they treat my kid good but then my kid, he’s African American but he is light skinned, and blue-eyed, blond hair… to me that’s so racist like, also you only treated him good because he is so different from the rest of the babies”.

One participant described wanting to fix the problem of institutional racism as it was a social issue that hurt her and touched her personally. As a parenting mom in foster care, it outraged her that a black peer was treated differently than her even though they were both in foster care.

“I haven’t experienced it but I witnessed it, happening to other girls and I do feel so bad, for them and that’s why you know in the future that’s why I want to be a social… I want to help and be a part of fixing that problem. Cos it hurts me, it’s so wrong. Like I know some probably pretend they don’t see it, they tell me I should be happy. I’m not happy that I’m treated different or better because I’m white”.

THEME 2 – IMPACT OF SYSTEM RESPONSE

Theme two looks at the impact of the systems’ response on the aged-out pregnant and parenting teens. Through their narratives, aged-out PPTs articulated the negative and positive consequences of their overall foster care experiences. Theme two has four categories, namely; (1) Yearning for Love & Connection / Attachment, (2) Identity (3) Self-Efficacy (4) Oppression. Within each category there are sub-categories.

Category 1 – Yearning for Love & Connection/ Attachment

Aged-out pregnant and parenting teens spoke about their challenging experiences while in foster care and their need and yearning for a semblance of love and connection within the system. The importance of attachment theory cannot go unnoticed as it provides us with some of the relational behaviors and internalized feelings adopted and / or developed by the respondents as a result of attachment or the lack of attachment connections experienced by the PPTs while in foster care. Within this category are sub-categories including: Isolation, Not Belonging, Rejection, Dissociation, and Feelings of Belongingness.

Category 1:1: Isolation

The need for interactive relationships between foster children, their parents, foster mothers and child welfare staff is crucial for healthy development and positive attachment development for our foster youth. A majority of the aged-out pregnant and parenting youth cited loneliness, rejection, lack of belonging, and disengagement, all of which indicate isolation and attachment disconnection within the foster care system.
1:1:1: Feelings of Loneliness:

The quotes below highlight respondents’ feelings of loneliness, a consequence of not being supported in the foster home or group home and facing many struggles and challenges by oneself. Participants described loneliness after being neglected in the foster home. One of the respondents described feeling lonely and scared due to no communication between foster mother and her in the home. Lack of attachment connection with foster mother and group home staff created a vacuum which made many respondents lonely.

“*It just felt like I didn’t really have anybody. I didn’t have like a support system the way I needed to. Kind of felt like I was facing, you know, like everything alone*”.

“*Umm there will be times when I felt lonely, scared, depressed and by myself because I wasn’t getting no communication from the foster mom, I didn’t know nothing about this foster mom, so I felt lost and scared and confused. I didn’t know what to do. I felt neglected*”.

1:1:2: Feelings of Not Belonging:

Respondents talked about not feeling any sense of belonging in the foster homes and group homes. This sense of not belonging reflects the lack of attachment connections with foster mothers and group home staff. Lack of belonging creates isolation which may be internalized by the youth. Some of the respondents described their feelings of not belonging as painful and reported a desire to provide their children with more love and attachment connections. The quote below is an expression of aged-out PPTs pain of not belonging:

“It was hard, like extremely hard for me to feel I belong somewhere and my kid belongs somewhere cos at that time, I just had one [child] with me, and it was heartbreaking. It affected my motivation a lot because it made me just want to stay home and make sure that my daughter was progressing and not myself*”.
The pain of being left out from the foster family activities and events is shown in the quote below:

“Well, my foster mother that I was living with when I was pregnant with my second child, um she didn’t make me feel belonged, she wouldn’t include me in family activities, she kind of didn't care if I went to school or not”.

1:1:3: Feelings of Rejection:

Feelings of rejection were described by some respondents as an impact of systems’ response to their overall needs and the result of lack of attachment connections with their foster parents. Knowing that they were not welcomed in some foster homes, simply because of their age, was a painful and unjust blow to them. The knowledge of not being wanted according to some Aged-out Pregnant and Parenting Teens, made them feel rejected and unloved. The feelings of rejection demonstrate another form of isolation which is consistent with severed attachment.

“It hurts because I was one of those teenagers who was being shipped from home to home because foster parents didn’t want to deal with me. They didn’t want me because I was a teenager. So I knew how it felt to be one of those teenagers, to be unloved and untouched. Everybody deserves to have the love no matter whether you are a teenager, baby, black, white, Hispanic, Indian, no matter, we are all God’s children”.

“…When you’re not their kid you feel like an outcast, that’s it”.

“We were left to suffer. Just to be brought into somebody else’s home to get neglected?….and it’s sad because no child should go through a situation like that. That’s unhealthy…I wouldn’t want my child through that. I am over protective of my child”.
Feelings of Disengagement:

Feelings of disengagement were explained by respondents as an impact of the lack of attachment connections they experienced within the foster care system. One of the respondents explained that after she had been forced to choose between aborting her baby and continuing her education, she felt betrayed by staff. She felt hurt and betrayed that staff did not think of her as capable in handling her education and expectant baby. This PPT said she felt angry and alienated from staff. The youth said she deliberately disengaged herself from staff and even hoped that aging out of foster care would be a ‘goodbye forever’ from staff. Another respondent also explained that she felt disengaged and disconnected from her group home and isolated herself when felt that she did not belong.

“I didn’t want to be close to these staff, um I felt they didn’t care, I felt I no longer seeing them like motherly guidance and counselor. I didn’t see them as that positive role model and I didn’t see them as anybody that I just wanted to continue on after I left care…. I just wanted to say goodbye forever”

“When I felt I didn’t belong, I um, secluded myself a lot which probably wasn’t good cos sometimes, you need to go out and be social. I just kept alone if I ever felt that way”

Category 1:1:5: Yearning for a Baby to Love and Bond

Respondents recounted their desires for wanting a baby to love and to be loved back. Being able to love a baby they conceived themselves was a result of the negative attachment connections experienced in their homes of origin and in foster care. Respondents believed that having a baby would bring back joy and love to them.

“When I realized I was pregnant, I was nervous. Um I really wanted my baby because I felt like I had the chance of having something of my own to love um, so yeah I was nervous”
“When I first found out I was pregnant with my first daughter, I didn’t think, I didn’t think about the future, like, I didn’t think about future wise I just thought that the love my mom didn’t give me, I could give to my own. So I had my daughter, and when I had my daughter, it changed my whole life. I felt like I had to live for somebody else”

Category 1:2: Feelings of Belongingness

It is significant to note that while respondents experienced negative attachment connections due to negative experiences in care, each Aged-out pregnant and parenting teens interviewed also spoke about feelings of belongingness in at least one of the several foster homes or group homes they were placed prior to aging out. Respondents shared with the interviewer about the positive attachments and connections they formed with loving and supportive foster parents and / or having had supportive caseworkers. Respondents shared their positive caregiving experiences which revealed the great work of many foster parents and caseworkers.

“She took me in with no, with no hesitation, no explanations, you know, and asked no questions about me and I felt like I finally found a foster mom that could accept me for me. I felt like I was loved. I wasn’t neglected no more. I had someone that would supported me, guided me, even though I was lost and confused, she still made me move forward and better myself. Not just for myself, for my children too. That’s what it made me feel that I belonged in this system, with this foster mom that actually cared about me and my children”.

Another statement from one of the respondents showed how grateful and appreciative the she felt when she entered into homes that received her warmly.

“Um, it had to be my last foster home, right before I was discharged. I was there from October up until April, and she was like the best foster mother that I had. And I had, no, I had four that, was my fourth one…. So when I was there she would try to like, she would try to tell me I can leave the child in the house, which was a big plus to me because, nobody else wanted to deal with my child. Like my child is not a bad kid, they [other foster parents] just didn’t want no responsibility with that. So for her to just
volunteer, you know, she would just volunteer..., it kind of opened me up. And then she would just do things like ask me, like what do you eat... so I'll know what to cook for you and your child. She would always ask me, how was your day, you know like, even with school, like once I started college, she would tell me like oh how is college? Like ask me questions that nobody really bothered to ask, so it just caught me like off guard and I would just like you know it was like a warm feeling to know that somebody was different”

Category 2 – Identity

Another impact of Systems Response was seen in PPTs sense of identity. Aged-out pregnant and parenting teens described their foster care experiences as having greatly impacted their identities and sense of selves. The experience of being a pregnant or a parenting teen in foster care and going through many negative life experiences shaped respondents’ identities and shaped their personalities as evidenced in their narratives. The findings of the study revealed sub-categorical themes embedded in the categorical theme of Identity, namely; Stigma, and Oppression.

Category 2:1: Identity & Stigma

Many PPTs reported feelings of stigmatization which affected their identity development. Respondents spoke about experiencing disgrace and reproach related to mental illness, learning difficulties, teenage pregnancies, and foster care placement.

2:1:1: The Stigma of Having Mental Illness:

A case example of stigmatization as a result of mental illness is reported by one of the respondents who felt judged and humiliated about her ability to raise her own baby. According to the respondent, she was made to choose between aborting her child and continuing her schooling
or having the baby and dropping out of school to raise her baby since. Staff did not believe that she could handle raising her child and going to school because of her mental health diagnoses.

“I think that staff that was handling my aging out process was discriminating towards me because she felt I couldn’t raise my baby with um my disorder and she felt that maybe I would be too overwhelmed with the baby and continuing school and it might trigger my mental illness… .They didn’t believe in me being pregnant and continuing my education like I didn’t believe in myself”

2:1:2: The Stigma of Being Pregnant and Parenting Teen:

Respondents talked about the stigma and humiliation associated with being a pregnant and parenting teen and which impacted on their identities and sense of selves. One respondent talked about experiencing some form of identity confusion and being at a loss as to who she was and her sense of purpose.

“… You kind of feel lost. Like you just don’t know where your life is going to go. And just like ask yourself like what’s the next step, like where? What direction should I go to? Because… you feel like you already made a wrong move, so it’s like anything after that is just like it’s either you’re making it worse or you’re trying to fix that.

Another respondent described feeling embarrassed to go to school knowing that they would be ridiculed about being young and pregnant. This was a blow to her sense of self.

“But I would be very embarrassed to go to school, and like especially it was during a time when people were having tours of the school for the incoming freshmen…. I used to hide, you know try to hide. Somehow it was getting hard as my belly was getting bigger. So … I would sit alone in lunch or may be not go to lunch and stay in the class, so it was really you know embarrassing.

Some respondents also spoke about the stigma of being ridiculed for being a pregnant and parenting teen, both by other teens in foster care and adults. One respondent stated that being ridiculed made her doubt herself and her sense of being.
“…People look at pregnant, like young pregnant girls like oh she’s fat. Oh she’s nasty, stay away from her, watch out for her, like stuff like that so, like at the beginning I felt, like a little like shaky about like even telling anybody like I had a small baby, cos I was so young and I looked so young in the face, so like it bothered me a little bit, cos that's not what I really wanted for myself but, things happen in life.

One respondent talked about feeling like a failure. The respondent told the interviewer that she already felt like a failure for being pregnant at an early age and did not want to compound the stigma by failing school.

“But I already felt like a failure having a, you know, being pregnant young…so I just knew that I am not going to make the situation even worse for myself and not go to school. So fear of failure again, fear of failing again made me, you know, I had to go to school and you know, I had to finish it”.

Category 2:1:3: The Stigma of Having Learning Difficulties:

Some respondents described feeling humiliated by their foster parents for having learning difficulties which affected their sense of identities and capabilities. A respondent reported she believed she was dumb after being repeatedly told that by her foster parent. According to the respondent, she was afraid of going back to school and failing as she knew the stigma of being perceived as dumb.

“I feel like when I was told I read on a second grade level, when I was told that I couldn’t have passed that test, when I was told that I was dumb head, that’s how I feel I it filled through my head for the rest like throughout my life and I just felt like I’m not worth it, like I can’t do it…. I’ve been around, friends that, who try to push me and I still felt worthless so. It’s just something that I plan on working on, within me”.

Category 2:1:4: The Stigma of Being In Foster Care:

The stigma of being a pregnant and parenting teen in foster care was voiced by about half of the respondents. The quote below highlights PPTs fear of the stigma attached to being a foster child and her attempt to hide her foster care status from her peers. She also attempted to maintain
good behavior in school to avoid her caseworker coming to the school and revealing her foster care status. The respondent mentioned how that stigma affected her sense of self.

“I didn’t want to be open and say like wow you know I’m a foster child because you would get made fun of because of that. Like oh you’re a foster kid. And then the other thing was if I was to do anything in school that got me in trouble, the person that would have to come to the principal’s office was not my mother, was not my grandmother, it was a case worker. So that was like really embarrassing”.

Another respondent talked about the stigma of being expected to fail in foster care. She stated that many foster parents expect pregnant and parenting teens to fail and cited examples of peers who were reported by their foster parents for slight mistakes and therefore lost their children to the system.

“… A lot of them [foster parents] expect us to fail. A lot of girls in the system, I’ve seen girls lose their babies every day to the system, like just for dumb stuff. So being a young mom, they are expecting you to fail. They’re expecting you to do wrong, cos you’re young, you don’t know how to raise no baby, you don’t even know how to raise yourself. So they’re expecting you to fail, they’re expecting something to happen. I’ve seen so many girls get their babies taken”.

Category 2:2: Identity & Oppression

Respondents talked about being burdened psychologically with continuous insults and mockery while in foster care which damaged their beliefs in their capabilities and abilities. Repeated exposure to such forms of oppression whether direct or subtle can violate one’s identity and result in negative internalizing feelings or behaviors.

Category 2:2:1: Being Insulted

The quotes below highlight the oppression experienced by PPTs as a result of being insulted constantly and its impact on PPTs identities and sense of selves.
“…my old foster mother, who just kept telling me, ‘you're not going to amount to anything’, or ‘you are just going to be good for just laying on your back and have sex’ and as a child in foster care and as a parent in foster care, that was hurtful and it made me felt like that was only what I was good for. Instead of encouraging me to do a lot better, she belittled me”.

The quote below further illustrates the impact of the systems response on PPTs identities and sense of being. The respondent stated that getting pregnant at a young age like her birthmother was a confirmation of the constant insults she endured from a foster parent that she was going to be like her mother who was labelled as a “whore”. According to the PPT, she came to believe that she was indeed a “whore”.

“I was always told that I’m going to be just like my mother. I was always told since ten [age 10], before I even knew what sex was, that I’m going to be a whore, I’m going to be this, I’m going to be a drug addict. I was always told all these negative things that being pregnant made it come to life. I started to believe what I was told. So I think that’s why I took that as a negative thing”.

Category 2:2:2: Being Mocked

Respondents talked about the oppression they felt being mocked for being foster children by peers in school and its adverse effect on their sense of self.

“…I was labelled the foster child. ‘Oh look, the foster child is coming’. My foster siblings…went to school with me and they [school mates] knew like I was the foster child…”

Category 2:3: Discouraged & Depressed

The quote below accentuates the impact of negative caregiving experiences on the identities of many respondents. Many respondents carried the heavy burden of being denigrated and hearing disparaging remarks about teenage pregnancy and foster care. Thus, they created belittling images of themselves that aligned with the comments made by their foster parents, agency staff, and peers.
“...before I used to just shut down, like I had um a moment I think it was two years ago, when I was discouraged and I would just like stay in my room and it kind of like I would see like a psychiatrist, not a psychiatrist but like a therapist, and I got evaluated and everything, by the Agency and they told me that I had depression, and it wasn’t like so much more like depression, like I didn’t feel good about myself or anything but it was just the way that, people viewed me and the things that people said kind of made me feel like you know like, maybe they’re right. So I just like ended up staying in my room for like a good two weeks and I’ll only come out to like shower or eat”

Category 3:1: Self-Efficacy

Another impact of systems response on Aged-out PPTs was in the domain of Self-Efficacy. Respondents described negative caregiving situations which led to them develop low self-efficacy and situations of positive caregiving which led to develop high self-efficacy. Respondents recalled that their belief in their abilities to flourish or attain good outcomes as foster care teen moms, in school, or life in general, were gravely compromised by negative caregiving experiences. Respondents described developing low-self-esteem, worthlessness, and inadequacy as a consequence of a lack of self-efficacy. Respondents also cited feelings of hopefulness in situations of positive caregiving.

Category 3:1:1: Low Self-Esteem - Feelings of Worthlessness

The quotes below highlights the feelings of worthlessness experienced by some of the respondents. One respondent shared that she did not have any belief in her capabilities and abilities.

“...to me I felt like they didn’t care It made me feel like I was nothing and I won’t be able to amount to anything”.
In another quote below, the respondent advised the child welfare system to be careful of not putting down or discounting pregnant and parenting moms since that effects the teen moms’ self-esteem and their abilities to stay positive for the babies they have in care.

“I just want to hope that you know, like the system… gets better for young girls who are pregnant or who have kids..., like it opens up more possibilities for them or if there are possibilities for them,... at least for them to be informed about it because I felt like people already looked down on us, just because of the situation, we’re in. Not only because we’re in care but also because we were pregnant at a young age. So it’s like some people, like, instead of trying to up lift us and just like tell us you know, good ways that we could just move forward, they just like keep us down, and they just like, don’t let us advance in life. They just keep us here and they don’t realize that, that’s not hurting us cos like if we are not advancing, we can’t… show our kids how to advance in life. So you’re keeping generations down, because if you’re keeping me down, you’re keeping my child down, and my child won’t know more than he could have and then that child, you know, it keeps going and it keeps going until someway, somehow, somebody breaks that cycle. But that shouldn’t… be… in the first place ‘cos it’s not our fault like you know. We didn’t choose to be in care like some people didn’t have options so yeah...”

Category 3:1:2: Low Self-Esteem - Inadequacy

Feelings of inadequacy were reported by Aged-out PPTs. One of the respondents shared that being a teen mom was purported to render one incapable of succeeding, in school and otherwise. Beliefs by foster parents in the lack of capabilities of teen moms was detrimental to their self-esteem, according to the respondents.

“... I was just kept being told like you know because you are young, and you had a child, things are limited for you, like you’re not going to finish school like everybody else. Just go get a GED. Like you know so it’s like well you don’t even have faith in me, like you don’t even think I can do it”.

“...After I heard about being pregnant and that I couldn’t finish school and then I had to make alternate decisions. I felt depressed, um confused, overwhelmed and a little bit like I felt that maybe I won’t be able to finish school because I was pregnant or maybe I wasn’t good enough to even take care of my kid cos the lady was saying abortion, she seemed very focused on abortion...”
Category 3:2 Self-Efficacy – Sense of Hopefulness

Statements of hopefulness, motivation, and beliefs in their self-efficacies were echoed by many Aged-out PPTs when they described some of their positive caregiving experiences. Respondents talked about the effect of encouragement by their foster parents and caseworkers and what it meant for them knowing that their foster parents, group home staff, and caseworkers believed in their capabilities to excel, despite being in foster care and young parents.

“They was more like that parent that cared to ask us how our day was …. to give us that motivation, inspirational talk, that pep talk saying that we can do better….like they encouraged us to go to school”

“I just felt like really, my social worker… supported me tremendously. I wouldn’t be where I’m at today if it wasn’t for that man…I felt comfortable with him... I actually kept a job the longest I ever had in my life which was for seven months… he kept me focused. I would go tell him different things that would happen at work, everything like it was awesome. Like he was really good”.

THEME 3 – EDUCATIONAL OUTCOME

Theme three looks at the educational outcomes for the PPTs, the overarching effect of both Theme 1-“Systems Response” (which is PPTs perceptions of caregiving by foster home, group home, institutions) and Theme 2 -“Impact of Systems Response”. Aged-out PPTs recounted the negative and positive caregiving experiences impacted on their overall educational outcomes. Theme three has four categories, namely: Lack of School Engagement, Drop-Out, Positive School Engagement, and After Foster Care Educational / Career Outlook.
Category 3:1: Lack of School Engagement / School Disengagement:

Respondents spoke about lacking the motivation to attend school which affected their educational outcomes. School disengagement was attributed to 1) from the foster home or group home, 2) basic needs, and 3) child care support.

Category 3:1:1: Lack of Basic Needs:

Respondents reported the lack of basic human needs, such as warm clothing and food, made it difficult to attend school. One respondent recalled her painful experience of not having basic feminine toiletries and being embarrassed to go to school stinking. She also recalled going to school very cold because her foster mother did not have money to buy her warm clothing and had to wait until the foster boarding check came. The respondent told the interviewer that she was too cold to hang outside to and with her friends in cold temperatures. The quote below demonstrates lack of basic human needs being a critical causation for PPTs lack of school attendance and culminating in poor educational outcomes.

“Sometimes I used to go to school stinking I used to go to school without no socks on, when it was freezing outside...and didn’t make me want to go to school stinking because somebody is going to laugh at me. It didn’t make me want to go outside and hang around my friends because I didn’t have the things I needed or I was too cold or I was hungry like it’s horrible I’m telling you it’s …”
Category 3:1:2: Lack of Child Care Support:

Lack of child care support was a consistent reason for lack of school engagement and positive educational outcomes. In fact, an overwhelming majority of Aged-out pregnant and parenting teens reported struggling with child care support. Below is quote which highlights the dire consequence of lack of child care support and its negative educational outcome.

“It affected my school attendance. I didn’t even get to finish school because I had to attend to a new born baby… I didn’t have time to go to school and take care of a new born baby by myself because child care, you know, financial issues, you know, not having my family members, no support, no guidance having to do everything on my own, even though I was a foster child in foster care with a child, it was still a lot to deal with by myself”.

Another respondent talked about childcare hardships forced her take evening classes to make up school credits and eventually to quit high school and take the GED.

“I was missing credits, it was just so much craziness going on. It was at a point that when I got into my last year, it was so like, so many like extra um like PM classes they wanted me to take, but you got to remember that, I have a small baby at home, and these foster parents are like hurry up and come get your baby, because they don’t want to pay for the child care and they’re not even working. So it was like, it was really tough for me. I had to wind up like going to get my GED”.

Category 3:2: School Drop-Out

Some respondents spoke about dropping out of school due to not receiving adequate academic, financial, and overall support from foster parents.

Category 3:2:1: Lack of Financial Support

Lack of financial support was reported as a causative factor in school dropout. One of the respondents stated that she made the decision to leave school to earn an income in order to support her unborn baby. The respondent proclaimed the interviewer was an adult who could
attend school and work at the same time, but that she had a baby in care with no income.

Therefore, she thought she was justified to leave school and earn an income to care for her baby.

“…I put school on hold and people were like oh, why put GED schooling on hold? I was like, because I’m a foster child. You’re an adult who can, who has an income already so you wouldn’t worry about income and you could go to school and go to work. I’m a foster child who doesn’t have an income so it was either worry about school or worry about getting some kind of income to save up for an unborn child.

Category 3:2:2: Lack of Caregiver Support

Lack of caregiver support can impact teens’ motivation for school and school success. This is highlighted in the quote below:

“Well, my school attendance wasn’t great because I wasn’t able to fully attend because I wasn’t receiving the help that I should have been receiving from my foster mother or my foster parents. So I was a, I was a drop out”.

Category 3:2:3: Lack of Academic Support

Some respondents talked about receiving poor to no academic support in foster care.

While this affected the school attendance of many participants, other aged-out PPTs dropped out since they could not handle the academic stress and the lack of academic help.

“I didn’t feel like there was a need to go to school because I wasn’t getting pushed or motivated to do the things I had to do for me as a parent and me as a student”.

Category 3:2:4: Stigma of Learning Difficulties:

Teens’ self-perceptions about their abilities to learn can inform their experiences. The stigma of having learning difficulties made one of the respondents believe that she could not possibly succeed in school and hence she dropped out of school.
“… I’m nervous to go back to school and I push myself far away from school… Um I didn’t finish the way I want my daughter to finish… I do feel that, you know, school can be hard, school can be difficult… I just feel like I’m not smart enough.

Category 3:2:5: Stigma of Mental Illness:

One of the respondents shared about dropping out of school after hearing doubt from staff about her ability to succeed in school and parenting due to having a mental illness. According to the aged-out PPT, she chose to drop out of school after hearing the doubt and losing belief in herself.

“… I just took it like a negative impact on my school and also a negative experience because I just gave up. I didn’t continue school which I would have liked to continue school but I wasn’t going to abort my baby to continue school”.

Category 3:2:6: Stigma of Being A Pregnant and Parenting Teen

Respondents talked about the stigma of being a pregnant and parenting teen and facing many ridicules by both peers and society. One respondent explained that she became too embarrassed to go back to school after she had her baby, and therefore, dropped out of school.

“I was ashamed and embarrassed to even go back to school with a new born baby so it set me back from going to finish school”

Category 3:2:6: Numerous Placements:

Multiple placements can definitely impact one’s sense of stability and motivation to attend school. Some respondents stated the stress of parenting and having numerous foster care placements informed their decisions to drop out. Two quotes from respondents highlight how PPTs educational outcomes were compromised by several movements.

“Me being moved to different foster homes, was one reason why I didn’t even get to finish school or start school”
“My experience was kind of difficult knowing that I was moving from home, from home, trying to maintain my education…”

Category 3:2:7: Caregiver Mistrust

Caregiver mistrust was also cited as one of the causal factors for school dropout. One of the respondents spoke unequivocally about not trusting anyone to take good care of her baby due to her history of maltreatment prior to placement and negative experiences in foster care.

“Having a baby set me back because I have to care for my child. So now, it wasn’t even about me, it was about my child. So I have to put my school and everything on hold, because I have to take care of a new born baby and having to take care of a new born baby means that I have to do everything for that child. I didn’t trust nobody with my child so I would rather not go to school to take care of my child.”

Category 3:3 School Motivation:

Positive relationships and encouraging words promoted school engagement. The quote below shows how some of the aged-out PPTs became stronger and achieved academic successes due to positive foster parent and caseworker connections.

“Yes it did, it did motivate me even more because it kind of like made it worth it, like you know just to know that people recognize what you’re doing because you know not a lot of people, just graduate and then go off to college. They are just like you know like okay this is it, but I decided to pursue college… So just knowing that I had my case worker and my foster mom just like backing me up and saying like you’re doing great, just was like a big motivation.”

Category 3:4 Baby Motivation

Some pregnant and parenting teens also spoke about their babies being a source of educational motivation and inspiration. Respondents talked about the birth of their children being the reason not to give up. Below are several quotes that highlight aged-out PPTs love for their bundles of joy.
“My son yeah like my son alone, he motivated me to go to school”

“So, one thing, once I was in care, um what motivated me to go to school was my child…”

“…As a mother, your motivation increases or if you don’t have no motivation, you know then you definitely got motivation when you are trying to do your best for your child”

“I felt that my son increased my motivation like with finishing school. It was like more critical reason for me to complete school…”

**Category 3:5 After Care Educational / Career Outlook:**

All respondents talked about having educational and career aspirations after aging out of foster care. Even for respondents who dropped out of school while in foster care, the desire to make it in life and not give up remained.

**Category 3:5:1 Educational Outlook:**

Every respondent shared that either they continued their schooling after aging –out of foster care or still plan to further their education. Some of the quotes below indicate the PPTs plans to move forward even after struggling in foster care.

“I do plan on going back to school. I just recently got a position for a job. I do plan on going back to school but um, I’m, I’m nervous to go back to school and I push myself far away from school but I do want to teach my daughter that, mommy did it, so you can do it. Um and that’s my main reason for wanting to go back to school and to let [child’s name omitted] know. Never give up on school”.

Category 3:5:2: Career Outlook:

Respondents offered a lot of information about their future career plans. The quotes below are some few examples showing Aged-out PPTs determination to become professionals in future.

“I want to transfer to Hunter College, to do the nursing program that they have cos it’s like one of the best in the city and that’s really my goal to you know get that accomplished”.

“My interest is to become a Nurse. I want to go back to school for my GED. I want to be a Nurse but I am more interested in cosmetology”.

“I’ve been going to Monroe College. I go to school for Hospitality Management. I’m actually working at a Cookie Dough Shop right now. I’m actually their kitchen assistant and I made all their orders and stuff like that. So, like, I’m in the works of own or managing a hotel and a restaurant all in one, like I’m really big into tourism and travelling and stuff like that so my future career plans is owning my own business, owning my own restaurant”.

“Well, I want to go to school for Nursing so I’m currently at BMCC [Borough of Manhattan Community College]. It’s going good, it’s just hard because I have to balance school, my daughter, and you know, I write for a magazine so I’ve got to do all three”

THEME 4 – LESSONS LEARNED

Theme 4 illuminates the lessons and values aged-out pregnant and parenting teens learned from their care experiences. Even though they all talked about the struggles and hardships of being in care, many of them saw some light in their tumultuous journey and were happy to hold on bright and positive moments as a basis for future and ongoing development.

Category 4:1: Resilience – Instilling Hope through Story Telling

Some respondents talked about learning resiliency through the hardships and difficulties they experienced as pregnant and parenting moms. The quote below highlights the PPTs desire
to write books that will help other pregnant and parenting teens who struggle with mental illness by instilling hope in them:

“Now that I went back to school and got my high school diploma, GED kind of thing, and hopefully write my story someday about the struggles that I faced as being mentally ill, as being an aging out teen, pregnant and the need for the bonding and the quality time and for someone to care and be there for you, when you are struggling with being a foster child and with all the stigmas that come from children that being in foster care... I want to be just, be that positive impact and influence and write that story so that for people that...someday will be in foster care, that feel like they are struggling and need that encouragement, they could probably pick my book up and read it and they see that there is a shining light at the end of the tunnel when they age out”.

Category 4:2: Overcoming - Staying Positive during Struggles

One of the respondents stated that hardship in foster care taught her the benefits of overcoming struggles. According to the PPT, she sees struggling positively now because it causes a person to be stronger and well prepared to meet future challenges.

“You want to know why I say the struggle is good. Because once you become, once you overcome that struggle, you know what to expect later on in life, you know how to already overcome the next obstacle, because you are preparing yourself for it....The struggle makes you stronger. We’re all of God’s soldiers that’s why He gives us the toughest battles to the strongest soldiers. The struggle is great. I love the struggle. Yes the struggle is a hand full...but the struggle is just to remind you that the struggle is only there to help you. The struggle is only there to help you, to push you to become bigger and better”.

Another respondent talked about how she made it to college in the midst of the hardships she faced while in foster care. The respondent stated that you still have to move on even in the face of struggles and not let the hardships make you halt your progress or potential..

“...Like everybody, when you’re a teen mom, they think of you like, oh she ain’t going to do nothing with herself. She ain’t going nowhere. So for me to actually graduate and I was able to attend college and stuff like that, like I, I was honored cos I didn’t feel like that could happen to me. And especially being a regular girl in foster, no parents, no family, like I didn’t think I could make it here. I didn’t think like it amazes me how far I have made it cos I’ve been through so many trials and tribulations and I
still like, I still make it. And I still like keep going. That’s why I thank God every day cos I didn’t think I’d be here right now like with everything that I’ve been through, like no”.

Category 4:3: Forming Lasting Friendship

Forming true and lasting friendships was one of the lessons learned during the chaotic foster care experience as described by one of the respondents. The PPT described the value of gaining the trust of another peer to love and count on who also faced neglect from birthparents and challenges in foster care.

“She [friend and peer] never really had anybody in the foster care system. I never had anybody in the foster care system. So we understood each other…. We’re the best of friends. She’s a sister from a different world. And the different world was to grow up in foster care to be expecting mothers and be neglected by not only our parents but by other foster parents. We loved each other we still help each other out and it took a lot for me to open my arms for somebody. Same way with her…”

Category 4:4: Aspiring to Succeed

Another PPT described the desire to succeed which stemmed from her contact with foster care professionals and her desire to keep her child from the same fate. In fact, many respondents stated that they wanted what was best for their children and believed that aspiring to succeed would keep their children safe.

“Seeing other people being professional and working, makes me feel motivated to do something with my life. So you know, me talking to therapists and social workers and going through the experience of being a foster kid, makes me want to do better for myself because I don’t want my kids to go through the same thing.”
Category 4:5: Motivation to Change Foster Care Policies

Some respondents talked about getting into professions such as social work, to advocate for foster care children. They spoke about wanting to be instrumental in changing policies to help improve the quality of life of foster children and especially pregnant and parenting mothers in care.

“So my goal is to, in the future is to read law, even after I become a social worker. I would love to um be I guess a professor of social work and teach. Like I would love to teach people, besides the books, just about real life, I guess what’s really going on like from my experience and telling them and helping change policy based on reality”.

Category 4:6: Learning Forgiveness

Learning not to judge and to forgive was one of the lessons learned in foster care according to one of the aged-out pregnant and parenting teens. For her, being pregnant herself made her look at her mother more favorably, less harsh, and with more understanding. She reported knowing that her mother was incapable of taking care of her children in her destructive state of drug addiction and problematic sexual behaviors, leading her mother to abandon her and her siblings.

“I had to admit that I was one of those that did judge young moms. Remember, I never wanted to be like my mother. So I already had that like oh, I can’t be like her cause everybody told me that I’m going to, and, I was seeing it in a bad way so when I, being a teen mom, I realized and I think that’s the point when I finally forgave my mother for leaving us. Like you know, it’s tough and you know, she had other factors. Me, I was just pregnant, young. She was pregnant, young, drug addict, that’s more, so I think I became more understanding, more mature, less judgmental and I realize cause you really do think it’s never going to happen to you, It can happen to anybody, it doesn’t matter how good at school you are…if you have sex, you’re going to get pregnant. It could happen to you”.
Chapter V: Discussion

The primary purpose of this research study was to understand the factors that contributed to school engagement and academic performance from the perspectives of aged-out pregnant and parenting teens (PPTs) and if racism impacted PPTs achievement of educational milestones. To this effect, the aims of the study were 1) To illuminate how the experiences of pregnant and parenting teens who have aged out of foster care influenced their engagement in school and educational outcomes; 2) To determine to what extent attachment theory, identity theory, self-efficacy, and critical race theory explain and illuminate barriers to and facilitators of promoting school engagement and positive educational outcomes for PPTs and 3) To determine whether internalizing behaviors and emotions and subsequent lack of school engagement are influenced by PPTs subjective experiences of racial microaggressions and perceived racism by social workers, caseworkers, and/or caregivers while in foster care. Four principal themes that emerged from the findings are: system response; impact of system response; educational outcomes; and lessons learned. Together these themes provide a comprehensive thematic model for understanding the effects of negative and positive foster care experiences and subsequent repercussions on the educational outcomes among the aged-out pregnant and parenting teens. (see Figure 1 which illuminates the four major themes and associated categories). These four themes are related and with each theme are categories and subcategories that impact these themes.

“System Response” (Theme 1), explains aged-out PPT’s perceptions of caregiving with its associated categories as: negative perceptions of caregiving; positive perceptions of caregiving; and perceptions of discrimination and racism. In Theme 1 (system response), aged-out pregnant and parenting teens spoke about their negative perceptions of caregiving such as, lack of a
nurturing familial environment, geographically remote placement, peer discord due to incompatible peer placement, school bullying, numerous placements, lack of academic, childcare, and support to meet basic needs as contributing to school disengagement. Positive perceptions of caregiving included supportive and caring foster parents, group home staff, and caseworkers. PPTs also described negative perceptions of sexual orientation, ethnic, and racial discrimination in foster care.

Theme 1 and its categories impact Theme 2 (Impact of System Response) and associated categories. “Impact of System Response” (Theme 2), illuminates how these negative and positive perceptions of caregiving in Theme 1 affected the attachment patterns, sense of identity, and self-efficacy of PPTs. Negative attachment connections explained PPTs’ experiences of loneliness, rejection and lack of belonging in the foster / group homes and were barriers to school engagement while positive attachment connections were associated with PPTs’ feelings of belonging which contributed to school motivation and engagement. Additionally, findings provided insight about how aged-out pregnant and parenting teens’ identities were compromised because of stigma, oppression, and discouragement. Pregnant and parenting teens’ sense of self-efficacy was compromised because of experiencing feelings of worthlessness and inadequacy while in care. Self-efficacy development was also associated with PPTs’ feelings of hopefulness.

Theme 1 and Theme 2 with their categories impact Theme 3 and associated categories. “Educational Outcomes” (Theme 3) illuminates the consequences of caregiving on PPT’s school engagement, disengagement, and educational outcomes. “Values and Lessons Learned” (Theme 4), highlights the values and lessons that pregnant and parenting teens learned from their foster care experiences despite their struggles and challenges. Based on all the emerging themes and categories, PPTs provided recommendations / lessons learned.
This discussion section looks at the aims of the study and discusses how the findings of the study are supported by prior research, how the study addressed research gaps and how it ties back to the emergent thematic model. Additionally, the discussion explores how the theoretical frameworks of attachment theory, identity theory, self-efficacy theory, and critical Theory support the findings of the study.

**Theme 1** (System Response)

Aim one of this research study was to illuminate how the experiences of pregnant and parenting teens who have aged out of foster care influenced their engagement in school and educational outcomes. Aged –out pregnant and parenting teens cited systems response (Theme 1) as contributing to school disengagement. Negative perceptions of caregiving such as numerous placements, lack of childcare, basic needs, and financial support accounted for educational outcomes among aged-out PPTs and which is consistent with existing research.

**Numerous Placements**

Aged-out pregnant and parenting teens cited numerous foster home placements as a crucial factor that contributed to school disengagement and drop-out. The placement disruptions and movements from one foster or group home to another can take a toll on the academic life of any foster child, especially when these movements are often followed by changes in schools, teachers, curriculum, and peers (Allen & Vacca (2010); Zetlin, Weinberg, & Kimm, 2004). Pregnant and parenting teens take on extra burden as they move with their babies or in varying stages of pregnancy.

The findings are consistent with prior research on the barriers to positive educational outcomes among foster care youth which found that numerous placement changes accounted for
educational decline among foster youth (Zetlin, Weinberg, & Shea 2006). According to the authors, frequent movements and school transfers make it difficult for the youth to adapt socially and academically. Prior research carried out by Burley and Halpern (2001) from the Washington State Institute of Public Policy on the barriers and facilitators to improved educational outcomes among Washington state foster children, found that the foster youth fell behind non-foster youth 15-20% on statewide standardized testing with one of the crucial reasons for academic decline and school disengagement being academic instability due to frequent placement changes. This experience of frequent moves may be particularly challenging and more foreboding in the academic lives of Pregnant and Parenting Teens in foster care. Data from this study shows that negative experiences in foster care such as numerous placement moves (system response) impact PPT’s self-efficacy to achieve any stable academic success (impact of system response) which may eventually cause PPTs to drop out of school (educational outcome). As shown in Figures 1 and 2, Theme 1 (system response) and its associated category (negative perceptions of caregiving) and with its sub-category (numerous placements) is related to Theme 2 (impact of system response) and its associated category (self-efficacy). Theme 3 (educational outcome) is impacted by Theme 2. Again, the emergent themes from the data support the self-efficacy theory discussed in the literature review (chapter 2) as a conceptual framework in guiding the study to understand some of the reasons behind school disengagement among aged-out pregnant and parenting teens in foster care.

Lack of Basic Needs, Academic, Financial & Child Care Support

Data from this study show how Theme 1 (systems response) and it associated sub-categories including lack of basic needs, academic, financial, and childcare support impact on PPTs sense of identity, attachment, and self-efficacy in Theme 2 (impact of systems response).
Consequently, PPTs identity, attachment, and self-efficacy affect their educational outcomes (Theme 3). Please refer to Figure 1. Consistent with existing literature (Aparicio, Pecukonis, & O’Neale, 2015; Haight, Finet, & Helton, 2009), pregnant and parenting teens face many struggles which make it difficult for them to maintain their education. A myriad of issues such as lack of academic support, basic needs, financial support, and child care faced by PPTs were difficult to balance with school. According to Barton and Vacca (2010), foster children experience academic roadblocks especially in foster homes where the parents are apathetic to the foster youth’s educational outcomes and provide no academic support. This provides a clear picture of pregnant and parenting teens’ fierce struggles, such as, financial worries, denial of basic needs, and lack of academic support from caregivers inevitably effect their ability to concentrate in school or attend school, and may lead to academic failures.

Aim two of this research study was to determine the extent to which attachment theory, identity theory, self-efficacy theory, and critical race theory explain and illuminate barriers to and facilitators of promoting school engagement among Pregnant and Parenting Teens and whether and how any internalizing behaviors and emotions influence school engagement and educational achievements. The following discussion looks at how these theoretical perspectives help underscore the results of the study and assist in meeting Aim two.

The Attachment Theory – Yearning for Love and Connection

Results from the data as shown in Figure 1 and tables 1 and 2 explain how Theme 1 (systems response) and its associated categories of negative and positive perceptions of caregiving impact the attachment connections and its categories of PPTs in Theme 2 (impact of systems response) and which also impact on the educational outcomes (Theme 3) of PPTs.
As discussed in Chapter 2 of the Literature Review, attachment theory provides insight into the lived experiences and relational behaviors of the pregnant and parenting teens while in foster care. Existing literature on attachment theory shows that a crucial factor for optimal child development and overall well-being, is the loving, nurturing, affectionate, strong, and long lasting relationship with a parent or caregiver (Ainsworth, et al., 1978; Curtois, 2014; Mooney, 2010).

In the study, aged-out pregnant and parenting teens described feelings of loneliness, lack of belonging, alienation, and rejection while in foster care. They also described yearning for familial environments and recounted moments when they felt “abnormal” and like “visitors” in foster homes. Consistent with extant research (Aparicio, Pecukonis, & O’Neale, 2015; Connolly, Heifetz, & Bohr, 2012; Pryce & Samuels, 2010), many pregnant and parenting teens desired to have babies to fill the void of loneliness, babies that would love them and that they (PPTs) will love. As discussed in the literature review on attachment theory, children develop schemas or Internal Working Models (IWM) about how they view themselves, others, and the world based on the interactions and responses of attachment figures and may sometimes develop IWMs of themselves as unlovable and unworthy as appraised by the responses of the attachment figures (Bowlby 1969; 1973). For some PPTs, it appears that creating their own child was based partly on an IWM they had developed from their attachment experiences.

Bowlby’s (1969; 1973) study on IWM, a critical aspect of attachment theory, is consistent with findings of this study as some aged-out pregnant and parenting teens spoke about feeling unlovable and unwanted due to being in unfamiliar foster home environments, being treated and feeling like visitors or strangers in the foster homes, and being in multiple placements. The findings clearly show respondents had internalized these negative experiences
and formed schemas and beliefs of self of being unwanted or feeling unwanted. Extant research shows that teenagers are at a higher risk of internalizing systematic negative experiences and messages which may cause later repercussions with externalizing behaviors (Mcew, Cui, & Holtrop, 2015). According to aged-out pregnant and parenting teens, these negative experiences affected their school motivation and decision to drop out of school. Consistent with existing literature, foster children are faced with negative outcomes such as chaotic home environments, lack of bonding or permanent adult relationships, and academic problems (Manlove et al., 2011).

The Attachment Theory - Caregiver / Group Home / Caseworker Support

All the 11 participants interviewed described positive relationships and attachment connections with at least one foster mother, group home staff, or caseworker. Aged-out pregnant and parenting teens also described how strong, nurturing, and supportive relationships gave them the impetus and motivation to attend school and do well academically. The findings of this study are consistent with literature and prior studies on positive attachment connections and school motivation and improved educational outcomes (Apfel & Seitz, 1996; Finn & Rock, 1997; Duchesne & Larose 2007). Strong caregiver and child relationships provide the child with a sense of security, protection, and comfort whereas the inconsistent, unpredictable, and non-responsive caregiver creates insecurity, and rejection in the child (Ainsworth, Behlar, Waters, and Wall, 1978; Bowlby 1969). Despite negative attachment experiences with some birthparents and foster parents, aged-out pregnant and parenting teens spoke about feelings of belongingness in nurturing and supportive foster or group homes. This finding is consistent with Joseph et al, (2014) study on formerly maltreated adolescent foster children’s abilities to form new attachment patterns with responsive, nurturing, and consistent foster parents. Attachment theory purports that children who develop secure attachment patterns with consistent and responsive caregivers
are able to take on risks, new adventures, and learn new skills and interests (Ainsworth, Behlar, Waters, and Wall, 1978). Likewise, some of the respondents of this study talked about how bonding with their foster parents and/or group home staff motivated their school attendance and educational outcomes.

As discussed in the Literature Review section of this paper, a prior study on associations between parental and peer attachment on academic outcomes found optimum academic performance among college students between ages 18-24 years (Fass & Tubman, 2002). This is consistent with PPTs’ narratives on the impact of nurturing foster parents or supportive caseworkers on school engagement and educational outcomes. This impact included sense of confidence and a drive to live up to their expectations. As discussed earlier, children view themselves, others, and the world based on the interactions and responses of attachment figures (Bowlby, 1969). One of the respondents talked about her attachment connections with her foster mother and educational specialist, which motivated her to achieve her educational goals. According to the respondent, her foster mother and educational specialist made her feel worthy of making it through college. Consistent with Bowlby’s (1969; 1973) IWM, the respondent began to view herself as worthy based on positive interactions and responses with her attachment figures. This respondent internalized these positive experiences and formed a new schema of being worthy, therefore influencing her school engagement and educational achievements.

**Identity Theory- Sense of Self and Confusion**

The research findings support the study’s conceptual framework of identity theory, explored in Chapter 2, to explain barriers and facilitators to school engagement and positive educational outcomes. The data shows that Theme 1 (systems response) and its related categories of negative and positive perceptions of caregiving impacted on PPTs’ sense of identity
in Theme 2 (impact of systems response) and related categories Educational outcomes (Theme 3) were impacted by changes in PPTs’ identity. Please refer to Figure 1 and tables 1, 2, and 3.

Experiences of stigmatization and oppression were noted by aged-out pregnant and parenting teens as crucial factors that impacted their identities and sense of being and which played major roles in their school disengagement and drop-out. Respondents described their experiences of stigmatization due to mental illness, teen pregnancy, being in foster care, and learning difficulties. One of the respondents talked about persistent negative messages by staff that she was not capable of handling both schooling and pregnancy due to her mental illness. Consequently, this impacted her beliefs about herself of not being capable of handling her pregnancy and schooling. Extant research shows that people develop self-stigma when they internalize continuous negative messages from society (Rose, Joe, & Lindsey, 2011). Prior research by Kools (1997) showed patterns of stigmatization and devaluation of self by foster youth had detrimental consequences on their educational attainment and lead some to drop out of school.

Findings of this study also revealed pregnant and parenting teens experienced identity confusion and lack of clarity of their purpose. One of the respondents described her teen pregnancy as a mistake and felt lost with her mistake. She did not know which direction she was supposed to go next. This was not uncommon, as many of the PPTs described nervousness, confusion, and fear of their new identities as pregnant and parenting teens. This finding is consistent with Erikson’s (1968) epigenetic theory of “Adolescent Identity and Confusion” which is characterized by questions and doubts such as “Who am I?” and “What am I?” It is in this adolescent state of identity crisis that some PPTs experienced oppressive treatments like being insulted about not amounting to anything, possibly magnifying the identity crisis.
The respondents reported that these oppressive tactics impacted their beliefs of who they were and their abilities to succeed. Existing literature shows that adolescents experience disengagement from school when they believe they are failures or underachievers (Whiting, 2006). One of the respondents talked about her fears of going back to school after an extended period of being called “dumb” by her foster parent. The experience of consistently hearing about her learning difficulties was paralyzing to her academic self-concept. The findings of this study show that children may view themselves as “academically dumb” based on their internalization of negative messages about their academic abilities. In the study, PPTs also talked about positive relationship and relatedness with their foster parents, group home staff, and caseworkers which helped cultivate a positive sense of identity and motivated them to attend and excel in school. Consistent with prior studies, positive adult connections and close relationships are predictors of adolescents’ positive regard of themselves and academic achievement. (Prince & Nurius, 2014).

The study’s findings on stigmatization and oppression inform the emergent theoretical model, which views experiences of stigmatization and oppression as part of the “system response” (by foster caregivers).

**Self-Efficacy Theory**

The data support self-efficacy theory used as a conceptual framework to understand PPTs’ school engagement and disengagement. Figures 1 and 4 illustrate how negative and positive perceptions of caregiving in Theme 1 impacted PPTs’ sense of self-efficacy in Theme 2 and which played a significant role in their educational outcomes in Theme 3.

In the study, pregnant and parenting teens talked about very supportive and caring foster parents, staff, and caseworkers who encouraged them and instilled hope in them. When asked to describe their understanding of words of encouragement, PPTs talked about encouragement
mainly as providing hope. Despite their struggles and negative experiences in care, having an adult who believed in their capabilities and pushed them to reach their potential through gentle encouragement was described as motivating force to go to school and attend to their future. A prior study by Witkow and Fulgini (2011) examined the significance of social support on academic achievement among adolescents. They showed that adolescents who received words of encouragement and social support earned higher grade point averages (GPA). This finding is also consistent with prior research conducted by Chin and Kameoka (2002), whose study of inner city youth showed how social persuasion predicted positive educational outcomes.

Self-efficacy theory is the belief in one’s capabilities to perform certain courses of action with the belief that those actions will be executed with success (Bandura, 1995, 1997). This theory explains barriers to and facilitators of school engagement among pregnant and parenting teens. Social persuasion, may boost a person’s self-efficacy and school performance through effective use of verbal encouragement.

Pregnant and parenting teens reported feelings of inadequacy, worthlessness, and low self-esteem. Some respondents explained their low self-esteem was a result of the lack of faith their foster parents had in them. One respondent talked about her foster parent telling her that having a baby as a teenager would limit opportunities for her in life and prevent her from completing her education. These statements can be damaging for any PPT who may have hope in rebuilding her life after a teen pregnancy. Some respondents explained being demoralized by crippling statements and beliefs of foster parents, subsequently giving up hope in their abilities to make it in life. The findings showed youth had internalized these negative messages which affected their self-efficacies. Consistent with a prior study discussed in the literature review in which 38 successful adult foster care alumni reported their success was related to positive
encouragement from their caregivers who showed interests in their school work and encouraged them not to give up (Martin & Jackson, 2002).

**Critical Race Theory**

As discussed in Chapter 2 of the literature review, critical race theory provides us with the insight to identify and analyze the aggregate impact of microaggressions on the pregnant and parenting teens, and to transform child welfare practice to eliminate them. In the findings, only one respondent talked about witnessing racial discrimination by group home staff. Although the respondent’s son was half African American, she reported her son received different treatment from the other African American babies due to his light skin and blue eyes. The respondent talked about how racism played a crucial role in experiences of other girls in the group home where she was and how it hurt her because “It’s so wrong”. The respondent talked about other girls not receiving special job opportunities and how she was told to accept and be happy with her privilege. Prior research studies indicate that racism tends to put down people of color and other marginalized groups and is viewed in the unequal distribution of resources and privileges (DiAngelo, 2012; Sue, 2010).

Consistent with prior research documenting racial bias and disparities in service delivery in the child welfare system (Bass, Shields & Behrman, 2004; DeNard & Garcia, Circo, In Press; Garcia, Kim, & DeNard, 2016), findings of the current study show that PPT’s of color receive less preferential treatment than their Caucasian counterparts. Although one of the respondent’s was a witness and not a recipient of racial discrimination, its debilitating effect on the victims were enough to elicit a reaction from her. These microaggressions and discriminatory practices were internalized by the respondent and influenced externalizing behaviors during a situation where she almost attacked staff in outrage after witnessing a racist incident.
The fact that the respondent witnessed racial biases and disparities in job opportunities for other girls in her group home is troubling as these negative experiences of pregnant and parenting teens of color can impact self-efficacy and positive identity, and in turn, educational outcomes. Research studies indicate that perceived and institutional racism affect personal, educational, and career efficacy among minority youth and African Americans (Broman, Mavaddat, & Hsu, 2000; Rollins & Valdez, 2006). Although this respondent only witnessed microaggressions toward other peers and their children, the findings of this study contribute to and extend the existing research on the debilitating effects of racial discrimination not only on pregnant and parenting teens but on their children.

Convergence of Theories

There are many parallels and convergences within the attachment theory, identity theory, self-efficacy theory, and critical race theory examined and the findings of the study that provide an underpinning for understanding the barriers to and facilitators for promoting school engagement and positive educational outcomes among pregnant and parenting teens in foster care. There were both negative and positive experiences that impacted PPTs attachment connections, sense of identity, beliefs in self-efficacy, and convergence.

The findings showed that negative attachment connections contributed to feelings of loneliness, rejection, and not belonging. Under these circumstances, PPTs sense of self and identity deteriorated. Stigmatization perpetuated their experiences and sense of self-efficacy, which in turn, affected their ability to remain engaged in school and complete educational milestones. Consistent with prior literature, absence of a nurturing and caring environment contributes to negative identity development (Erikson 1968); and consequently, may disrupt a positive sense of self-efficacy (Whiting, 2006). Similarly, the findings also showed that positive
attachment connections with foster parents, group home staff, and agency staff provided some
PPTs with a sense of belonging, protection, and security. Having a good concept about
themselves made them feel challenged to go to school and be successful. Positive identity
enhanced their self-efficacies. Consistent with prior research, creating a nurturing and supportive
environment and promoting positive attachment connections will cultivate positive identity,
develop self-efficacies, and predict positive educational outcomes (Fass & Tubman, 2002;
Duchesne & Larose, 2007; Witkow & Fulgini, 2011).

Finally, as prior research has demonstrated (Broman, Mavaddat, & Hsu, 2000; Rollins &
Valdez, 2006), findings from the current study showed that racial discrimination has been shown
to sever attachment connections, which can negatively influence positive identity and self-
efficacy, and in turn, educational outcomes. Implications for future practice and trainings on
attachment, identity, self-efficacy, and critical race theories should move towards convergence
rather than focusing on one theory in isolation for building caring and nurturing environments
that link positive internalizing behaviors and emotions in promoting school engagement and
attaining educational milestones.

Limitations

While the findings of this research study extend existing literature, and provide insight to
what factors facilitate and act as barriers to school engagement and educational achievement
among pregnant and parenting teens, there are some limitations. Despite the in-depth and rich
information gathered from the aged-out pregnant and parenting teens, the qualitative results
cannot be generalizable to all aged-out pregnant and parenting teens but specifically to those that
participated in the study. One of the flaws in the study design was the interview settings.
Participants chose their preferred place and availability for the interviews. The difficulties posed
were most PPTs only available during evening hours; homes that had barking dogs, and noisy public settings such as McDonald’s. Participants who were returning from work or chose late interviews may have been tired, and interruptions from various public spaces may have caused participants to lose track of what they were saying and which may affect the richness of their story telling.

Original sample criteria were pregnant and parenting teens who had aged out in the past ten years to ensure that participants were able to remember strong details of their experiences in foster care. Recall bias may also be a limitation to the research due to possible discrepancies in the veracity of PPTs retrospective recollections of their lived experiences. Recall bias could also be PPTs minimizing their narratives in an attempt to block out any unpleasant memories. PPTs may also have exaggerated as a way of fighting the system or exposing its irregularities.

Participants’ knowledge that researcher was a social worker who works with the child welfare system could be a limitation to the study in that aged-out pregnant and parenting teens may not have shared certain information that they may have deemed to be reportable. Participant’s past experiences within the child welfare system may have impacted the way they discussed their experiences. There were delays in the recruitment process. Some participants later informed researcher that their reasons for postponing interview appointments were because they were angry and mistrustful of speaking to anyone who worked for or was tied to Children’s Services. These claims could have caused participants to withhold certain information leading to participant bias.

Researcher bias could also be a limitation to this study and in the way results were reported. The researcher interviewed aged-out participants who were mostly disgruntled with the very system that the researcher works in. This evoked some sense of guilt for the researcher due
to the complaints and advice that workers like researcher should be doing to make the system work better. It is possible that this influenced the probing questions and the report of results.

Lastly, one of the aims of the research was to understand how racial microaggressions may have impacted PPTs school engagement and educational outcomes. The study yielded limited data on this subject. This may be due to the small sample size or due to participants having workers, foster parents, and or teachers of similar races other than their own. Future quantitative research with a larger sample size should be conducted or expand upon sample to include PPTs across different agencies and assess for potential differences across and within agencies to widen our knowledge base and understand the whole spectrum of the facilitators and barriers of school engagement and educational outcomes for PPTs both in foster care and those who have aged –out. The researcher was also aware of her insider positionality to this study, being a child welfare worker with her own point of views and biases about foster youth, foster parents, group home staff and the foster care system in general. However, great efforts were taken to minimize any biases though the use of memos, staying close to the data during initial coding, and consultation with the researcher’s chair person.

Despite the limitations to the research, this study adds to the body of knowledge and contributes to a fresh and important lens, adding to the body of knowledge, into determining how attachment, identity, self-efficacy, and critical race theories and internalizing behaviors explain and illuminate barriers and facilitators to school engagement.

**Implications for Practice, Policy, and Research**

The rich narratives of the aged-out pregnant and parenting teens while in foster care have important implications for fostering and enhancing attachment connections, identity
development, and self-efficacies to promote school engagement and educational outcomes for pregnant and parenting teens in foster care. Findings also show directions for future policies and further research.

Efforts should be made by child welfare system and agency administrators to meet regularly, with the pregnant and parenting teens to learn about what they need and their insightful input on how to best meet them. Additional efforts to invite critical stakeholders, the pregnant and parenting teens, into program meetings to hear their input concerning their well-being, school engagement and motivation, and educational advancement are warranted. According to Lincoln (1995), “Adults often underestimate the ability of children to be shrewd observers, to possess insight and wisdom about what they see and hear, and to possess internal resources we routinely underestimate” (p. 89). Consistent with the findings, one of the respondents said that the foster care system really needs to do far better for pregnant and parenting teens in foster care and to open possibilities and opportunities for these girls. The respondent went on to say that pregnant and parenting teens are looked down upon by the system instead of the system lifting them up. She concluded that, what the system does not realize is that by putting pregnant and parenting teens down, the system paralyzes the pregnant and parenting teens’ abilities to parent their babies who end up suffering like their teen parents and the cycle continues “until someway, somehow, somebody breaks that cycle”.

Researchers may succeed in hearing the voices and narratives of the lived experiences of pregnant and parenting teens in foster care and all too often, we may hear foster care children share their experiences at, for instance, symposia, workshops, and conferences. How often, however, do child welfare agencies hold their own intra or inter agency meetings with the pregnant and parenting teens just to hear the experiences of those who are in their care? In one of
Woodrow Wilson’s speeches to Congress in 1918 and as cited by Hannum (1993), he explained the need for self-determination as: “Self-determination is not a mere phrase. It is an imperative principle of action, which statesmen will henceforth ignore at their peril”. Ryan and Deci (2000) explained that our biological tendencies to grow into our potentialities rest heavily on our self-motivation and encouragement from environmental forces. Understanding the intrinsic motivation of humans and recognizing PPTs self-determination needs is crucial. Including PPTs participation in their own program development meetings will help develop effective strategies founded on the mutual perspectives of both PPTs and administrators. More so, the foster care system could begin to age-out a generation of successful pregnant and parenting teens who are autonomous, relational, know who they are, self-efficacious, school and career motivated.

Pilot study program / research should be used to develop intra and inter agency pregnant and parenting teens support groups facilitated by professional staff and peer co-leaders which will could provide emotional and psychological healing among PPTs, educational support, and opportunity to share ideas, resources, and experiences in child caring issues. In the study, many respondents talked about social isolation, loneliness, and rejection. Consistent with existing literature, peer support groups help form membership and identity formation especially in the same minority group where the awareness of shared pain can unite them into a strong defining group (Oyersman, Terry, & Bybee, 2002). Randomized clinical trials have also shown that peer support groups facilitate changes, empowers group members and reduces negative behaviors among members (Albrecht et al., 1998).

Child welfare staff and foster parent trainings on Attachment, Self-Efficacy, Identity and Critical Race Theory should be conducted at least every quarter of a year. Trainings are necessary to facilitate ongoing dialogue between staff and foster parents’ understanding of these
theoretical frameworks and their implications for creating an atmosphere that fosters meaningful relationships with pregnant and parenting youth towards successful educational outcomes. A pre-test and post-test study conducted on Attachment Theory at a staff training showed a need for staff trainings to cover the content illuminated in the proposed model (Ohene, 2016). The findings in the study showed that attachment connections with foster parents and staff were an impetus for school engagement. Further research, such as, randomized control trials should be conducted to examine if the aforementioned trainings increase foster child relatedness, positive self-concept, self-efficacy and educational achievement. In addition, additional funding will be needed to support aforementioned training programs and ongoing research to examine the impact of such programs on improving the emotional, social, and educational development of pregnant and parenting teens in foster care (Gotbaum, Sheppard, & Woltman, 2005).

Psycho-education on stigma and identity formation should be introduced in the child welfare system, especially to youth that will age out of foster care to help them deal with identity issues before they leave foster care. The findings showed a major problem of respondents’ experiences with stigmatization and its impact on academic outcomes. Psycho-education and role plays dealing with stigmatization of mental illness, learning difficulties, teen pregnancy, and foster care status should be encouraged (Kools, 1997) and incorporated in the independent living skills workshops which are aimed at providing foster youth with independent living skills and preparing them for smooth transition into the community when they age out of care (PL106-169).

Policies recognize foster children as a fast-growing body who are capable and motivated to improve the systemic foster care conditions. Researchers and policymakers need to capitalize on this energy, as demonstrated and vocalized by a few of the PPTs in this study. Similar to
student government and work unions (Ferris & Stein, 2014), foster care government could give legal voice to children in foster care and to pregnant and parenting teens. Cutting edge and innovative research to examine how foster care government run by foster care children can ameliorate some of the prevailing and deteriorating foster care conditions in general should be encouraged.

Presently, little is known about impact of ethnic and racial discrimination on school disengagement among pregnant and parenting teens. The findings showed respondents impacted emotionally by ethnic and racial discrimination and fearful of going to school, leaving their children with foster parents / group home staff. Future studies should explore the subtle effects of racial microaggressions, ethnic, and LGBTQ discriminatory practices among pregnant and parenting teens and the impact on their educational outcomes.

Finally, Every Student Succeeds Act (ESSA, 2015), which stipulates children be maintained in their school of origin unless it is determined not to be in the child’s own interest, should be enforced by all welfare agencies. Findings showed respondents educational outcomes were impacted by school changes due to foster home placements. School stability will contribute to more school engagement for pregnant and parenting teens. Future research should focus on examining the impact of the Every Student Succeeds Act on PPT’s academic outcomes.

**Conclusion**

While teen pregnancy and parenting is associated with many challenging outcomes, it is clear that pregnant and parenting teens in foster care face additional barriers toward achieving their educational outcomes. The findings revealed an emerging theoretical model of how PPT's
negative and positive perceptions of foster care giving (systems response) impacted their attachment — relational behaviors, identity-self-concept, and self-efficacy, and racial bias / discrimination (impact of systems response). In turn, these experiences impacted their educational outcomes. This study brings significant contribution to existing research on facilitators and barriers to educational outcomes among pregnant and parenting teens and extends research on the role of attachment, identity, and self-efficacy theories in illuminating educational outcomes among pregnant and parenting teens in the New York City child welfare system. Additionally, findings of this study indicate a need for more extensive research on how racial, ethnic, and LGBTQ discriminations impact educational outcomes for pregnant and parenting teens in foster care.
Appendix A

Basic Face Sheet and In-depth Interview Guide

Demographic information will be solicited from each research participant. Researcher will explain the demographic categories and research questions in very simple and laypersons language. As a way of building relationship with research participant and getting them to be relaxed open to the interview process and questions, researcher will begin interview questions on the roadmap of the experience of the pregnant and parenting teen from the onset of finding out about the pregnancy until aging out of foster care and how the experience influenced PPTs motivation to attend school.

A. Demographic Questionnaire

1. What is your gender? Please circle your answer.
   1. Male
   2. Female
   3. Other

2. What is your age (in years)? _____________________

3. Which one or more of the following would you say is your race/ethnicity? (Check all that apply)
   1. White
   2. Black or African American
   3. Asian
   4. Native Hawaiian or Other Pacific Islander
   5. American Indian, Alaska Native
   6. Hispanic or Latino
   Or
   7. Other [specify]______________

4. What is the highest grade or year of school you completed before aging out of foster care?
   1. Up to Grade 8
   2. Grades 9-11
   3. Grade 12 or GED (High school graduate)
   4. Vocational Training / Alternative School
   5. College 1 year to 3 years (Some College or Technical School)
   6. College 4 years or more (College graduate)

5. What is the highest grade or year of school you completed after aging out of foster care?
   1. Up to Grade 8
   2. Grades 9-11
   3. Grade 12 or GED (High school graduate)
   4. Vocational Training / Alternative School
   5. College 1 year to 3 years (Some College or Technical School)
6. College 4 years or more (College graduate)
4. Master’s degree
5. Doctoral degree

6. What is your current employment status?
   1. Full Time
   2. Part-Time
   3. Per Diem / Seasonal Jobs
   4. Self-Employed
   5. Not working

7. How long have you been employed in your current work setting (in months or years)?

B: In-depth Interview Guide

**Introductory – Pregnancy and Parenting Experience**

1. Describe what your experience has been like from the time you realized that you were pregnant while in foster care and until you aged out of foster care?

2. How did your experience of being pregnant and or parenting teen affect your school attendance?

**Module 1: Factors related to school engagement and educational outcomes among PPTs in foster care**

3. What motivated you to go to school while in foster care? What did not motivate you to attend school?

4. In what ways did your group home or your foster home environment impact your education?

   (a). What were conditions that contributed to your school engagement?
(b). What were the not too favorable conditions that contributed to your lack of school engagement?

C. What factors impacted your educational outcomes or well-being (e.g., attendance, grades, aspirations to further educational trajectory)

(d). How would you say the foster home or group home influenced your decision to stay engaged in school and your overall educational outcomes?

Module II: Attachment Theory and educational engagement / outcomes among PPTs of color

5. Describe your relationship with your parents or guardians before you were placed in foster care? In what ways did they influence your motivation to attend school and your educational outcomes?

Prompt: Tell me about a single episode that you felt a sense of belongingness in your foster home or group home? How did this episode impact your motivation to attend school and your educational outcomes?

Prompt: Tell me about a single episode that made you not feel accepted in the foster home or group home? How did this episode impact your motivation to attend school and your educational outcomes?

6. Describe your relationship with your foster parents? In what ways did they influence your motivation to attend school and your educational outcomes?

7. Describe your relationship with social workers and other professionals. In what ways did they influence your motivation to attend school and your educational outcomes?

8. Tell me about the people that supported you prior to aging out of foster care. How did they contribute to your school engagement and outcomes?
9. Tell me about the people that supported you while you were pregnant. How did they contribute to your school engagement and outcomes?

Module III: Identity Theory and educational engagement / outcomes among PPTs of color

10. Tell me how being a pregnant and parenting mother in foster care impacted your identity and well-being. How did your relationship with your foster parents, caseworkers, staff, and/or other professionals affect your identity?

11. How did any changes in identity influence your motivation to attend school and achieve good educational outcomes?

12. In what ways did your educational experience impact your identity?

Module IV: Self-Efficacy Theory and educational engagement / outcomes among PPTs of color

13. How do you understand words of encouragement? Describe how important it is from your perspective.

Prompt: Can you tell me about a single episode that you received positive and constructive feedback on an action you took while in care as a pregnant or parenting teen? How did this episode impact your motivation to attend school and your educational outcomes?

Prompt: Can you tell me of a single episode where you received negative feedback on an action you took while in care as a pregnant or parenting teen and what were your reactions? How did this episode impact your motivation to attend school and your educational outcomes?
Module IV: Experiences of perceived racism, macroaggressions, and discrimination

14. Think about a time in foster care when you might have experienced some form of racism or felt discriminated against by a childcare worker, social worker, therapist, foster parent, or teacher? Would you be willing to describe one incident? If so, how would you describe your feelings? How this experience and other experiences like these might impacted your identity and self-worth? How might they have impacted your school engagement and educational outcomes? Conclusion

15. Since you aged out of care, have you gone back to school? If so, tell me what your interest are and what you hope to do in the future. If not, tell me if you hope to go back to school.

16. What are your future academic or career plans?

17. Do you have anything else to tell me?

Thank you for taking time off your busy schedule to interview with me. Are there any questions you would like me to ask me before we bring this interview to an end?
Appendix B

Consent Form

Aged-Out Pregnant and Parenting Teens Speak Out About Academic Engagement and Performance: A Retrospective Study

Researcher: Serena K. Ohene, L. M.S.W.; Doctoral Student; University of Pennsylvania School of Social Policy and Practice; 3701 Locust Walk, Philadelphia, PA 19104
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Why is the research taking place?
The goal of this research project is to understand from your lived experiences and perspectives, the contributing factors to lack of school engagement and your perspectives in achieving educational milestones.

What would I be asked to do?
If you provide consent, you will be asked about your reasons for school disengagement and will also be asked if your lack of school engagement were in anyway influenced by your subjective experiences of racial microaggressions and perceived racism by social workers, caseworkers, and/or caregivers while in foster care.

What are the possible risks or harms if I take part?
The risks of participating are minimal. In the unlikely event that you find that what you discussed in the interview is upsetting to you after the interview is over, please be in touch with me. I will provide you with some names and numbers of individuals or agencies that can provide further assistance. I will also endeavor to stop the interview in the event that you experience any overwhelming emotions.

What are the possible benefits?
There are no direct benefits to you for being in the study. However, it is also possible that having a chance to share your story will be an interesting and possibly a rewarding experience for you.

What are my choices if I don’t take part?
Your participation in this study is voluntary. Although I would like you to answer as many questions as you can, you have the right to not respond to any of the questions. You also have the right to withdraw from the study without any risk to you.

Who would see study information about me?
All precautions will be taken to protect your privacy. All information you report to me is confidential. All identifying data will be stored on the computer with password protected and a file cabinet securely locked. Pseudonyms will be used to replace your names for confidentiality purposes. I will also be audio recording to ensure that I capture all of what you say. The audio tape will be transcribed by a professional transcriptionist and all tape recording gadgets will be destroyed upon completion of the dissertation project. Each research participant will be assigned a code number and pseudonym for cross references. All information you report will not to be discussed with others, with this exception: any information about child abuse or intent to harm
self or others will be reported to authorities, as required by law. To protect your privacy, you are asked not to write your name on any forms.

**Would I be paid or compensated for my time?**
I will be responsible for compensating each subject that participated in the research interview, an amount of $30.00 in a form of cash compensation. Research subjects who opt for cash remittance will sign a form of receipt for participation.

**Will the study cost me anything?**
No.

**What else do I need to know?**
If you have any questions, you can call Serena Ohene at 646-320-1054. If there is any important information that you forgot to share during the interview, please do not hesitate to call and/or e-mail me after the interview within five days.
The Office of Regulatory Affairs at the University of Pennsylvania oversees this study to make sure that the rights of people who take part are protected. The Office of Regulatory Affairs can be reached at (215) 898-2614 with any questions or concerns. You may also contact the Research Participant Coordinator, Philadelphia Department of Public Health Institutional Review Board, 215-685-0869.

If you agree to participate: The study described above has been explained to me. By signing below, I voluntarily consent to take part in this research. I have been told that I can refuse to answer any question or leave the study at any time, without penalty. I have had a chance to ask questions. I have been told that I may call the Office of Regulatory Affairs if I have questions about my rights or if I have concerns or complains about the study.

Your signature: __________________________________________Date _____________

Your printed name: __________________________________________Date _____________

Investigator Signature: __________________________Date _____________
Participant Recruitment Flyer

RESEARCH PARTICIPANTS NEEDED!

“Aged-Out Pregnant and Parenting Teens Speak Out About Academic Engagement and Performance: A Retrospective Study”

Researcher: Serena K. Ohene, L. M.S.W.; Doctoral Student; University of Pennsylvania School of Social Policy and Practice; 3701 Locust Walk, Philadelphia, PA 19104
Phone: 646-320-1054; Email: sohene@sp2.upenn.edu

Who is Included & Excluded?
Pregnant and Parenting Teens that have aged out from foster care within the past 10 years.
Pregnant and Parenting Teens currently in foster care are excluded.

Why is the research taking place?
The goal of this research project is to understand from your lived experiences and perspectives, the contributing factors to lack of school engagement and your perspectives in achieving educational milestones.

What are the possible risks or harms if I take part?
The risks of participating are minimal. In the unlikely event that you find that what you discussed in the interview is upsetting to you after the interview is over, please be in touch with me. I will provide you with some names and numbers of individuals or agencies that can provide further assistance. I will also endeavor to stop the interview in the event that you experience any overwhelming emotions.

What are the possible benefits?
There are no direct benefits to you for being in the study. However, it is also possible that having a chance to share your story will be an interesting and possibly a rewarding experience for you.

What are my choices if I don’t take part?
Your participation in this study is voluntary. Although I would like you to answer as many questions as you can, you have the right to not respond to any of the questions. You also have the right to withdraw from the study without any risk to you.

Who would see study information about me?
All precautions will be taken to protect your privacy. All information you report to me is confidential. All identifying data will be stored on the computer with password protected and a file cabinet securely locked. Pseudonyms will be used to replace your names for confidentiality purposes and all tape recording gadgets will be destroyed upon completion of the dissertation project. Each research participant will be assigned a code number and pseudonym for cross references. All information you report will not to be discussed with others, with this exception: any information about child abuse or intent to harm self or others will be reported to authorities, as required by law. To protect your privacy, you are asked not to write your name on any forms.
Would I be paid or compensated for my time?
I will be responsible for compensating each subject that participated in the research interview, an amount of $30.00 in a form of cash compensation. Research subjects who opt for cash remittance will sign a form of receipt for participation.

Will the study cost me anything? No.
Figure 1

FOUR MAIN THEMES AND CATEGORIES

THEME 1: SYSTEM RESPONSE
1:1: NEGATIVE PERCEPTIONS OF CAREGIVING
1:2: POSITIVE PERCEPTIONS OF CAREGIVING
1:3: PERCEPTIONS OF DISCRIMINATION & RACISM

THEME 2: IMPACT OF SYSTEM RESPONSE
2:1: ATTACHMENT CONNECTIONS
2:2: IDENTITY / SENSE OF SELF
2:3: SELF-EFFICACY

THEME 3: EDUCATIONAL OUTCOMES
3:1: LACK OF SCHOOL ENGAGEMENT
3:2: SCHOOL DROP-OUT
3:3: CAREGIVER MISTRUST
3:4: BABY MOTIVATION
3:5: AFTER CARE EDUCATIONAL OUTLOOK

THEME 4: LESSONS LEARNED
4:1: RESILIENCE
4:2: OVERCOMING STRUGGLE
4:3: FORMING LASTING FRIENDSHIP
4:4: ASPIRING TO SUCCEED
4:5: MOTIVATION TO CHANGE POLICIES
4:6: LEARNING FORGIVENESS
Table 1
THEME 1: SYSTEM RESPONSE

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<thead>
<tr>
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<tbody>
<tr>
<td><strong>Category 1:1</strong></td>
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</tr>
<tr>
<td>Feelings of Being Hospitalized</td>
<td>Category 2:1</td>
<td>Category 3:1</td>
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<td>o Regimented Life</td>
<td>Generous and Caring Foster Mother</td>
<td>Sexual orientation Discrimination</td>
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<td><strong>Category 1:2</strong></td>
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<tr>
<td>Yearning For Family Belongingness</td>
<td>Category 2:2</td>
<td>Category 3:2</td>
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<td>Group Home Support</td>
<td>Ethnic Discrimination</td>
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<td>o Visitor Feeling</td>
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<tr>
<td>o Non-Familial Environment</td>
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<td>o Geographical Environment</td>
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<td>o Peer Discord</td>
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<td><strong>Category 1:3:</strong></td>
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<td>Unsupportive Foster Parent, Group Home, Institution, Birth Family</td>
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<td>Category 3:3</td>
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<td>Support from School</td>
<td>Racial Discrimination</td>
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<tr>
<td>o Caregiver Mistrust</td>
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<tr>
<td>o Working for Money</td>
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<td>o Screening for Foster Parents</td>
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<td>o Fear of CPS Removal of baby</td>
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<tr>
<td>o Teenager Rejection</td>
<td></td>
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<tr>
<td>o Numerous Placements</td>
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<tr>
<td>o Being Judged / Stereotyped</td>
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<tr>
<td>o School Bullying</td>
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<td>o Unsupportive Law Guardian</td>
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<tr>
<td>o Negative Perceptions of Caregiving by Birth Family</td>
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<td><strong>Category 2:4</strong></td>
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<td>Support from Agency Caseworker / Educational / Vocational Support</td>
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**Table: 2**

**THEME 2: IMPACT OF SYSTEM RESPONSE**

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<th>Category 2: Identity</th>
<th>Category 3: Self-Efficacy</th>
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<td>Isolation</td>
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<td>o Feelings of Loneliness</td>
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<td>o Worthlessness</td>
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<td>o Feelings of not Belonging</td>
<td>o Learning Difficulties</td>
<td>o Inadequacy</td>
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<td>o Feelings of Rejection</td>
<td>o Being In Foster Care</td>
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<td>o Feelings of Disengagement</td>
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<td><strong>Category 1:2</strong></td>
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<td><strong>Category 3:2</strong></td>
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<td>Belongingness</td>
<td>Oppression</td>
<td>Hopefulness</td>
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<td>o Insulted</td>
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<td>o Mocked</td>
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### Table 3

**THEME 3: EDUCATIONAL OUTLOOK**

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<td>School Drop Out</td>
<td>Caregiver Mistrust</td>
<td>Baby Motivation</td>
<td>Aftercare Educational Outlook</td>
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<td>o Lack of Basic Needs</td>
<td>o Lack of Financial Support</td>
<td>o Stigma of Learning Difficulties</td>
<td>o Numerous Placements</td>
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<td>o Lack of Child Care Support</td>
<td>o Lack of Caregiver Support</td>
<td>o Stigma of Mental Illness</td>
<td>o Stigma of Being Pregnant and Parent</td>
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<td></td>
<td>o Lack of Academic Support</td>
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Table 4

THEME 4 LESSONS LEARNED

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<th>Category 1</th>
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<th>Category 4</th>
<th>Category 5</th>
<th>Category 6</th>
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<td>Resilience</td>
<td>Overcoming</td>
<td>Forming Lasting</td>
<td>Aspiring to Succeed</td>
<td>Motivation to Change Policies</td>
<td>Learning Forgiveness</td>
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<td></td>
<td>Instilling Hope through Storytelling</td>
<td>Friendship</td>
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<td></td>
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<td>Staying Positive during Struggles</td>
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References


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